2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005
Secretary of State

DOCUMENT# P03000126237

Entity Name: M.P. DRYWALL FINISHING INC.

Current Principal Place of Business:

1229 BERMUDA LAKE LANE
301
KISSIMMEE, FL 34741

New Principal Place of Business:

1221 BERMUDA LAKE LANE
204
KISSIMMEE, FL 34741

Current Mailing Address:

1229 BERMUDA LAKE LANE
301
KISSIMMEE, FL 34741

New Mailing Address:

1221 BERMUDA LAKE LANE
204
KISSIMMEE, FL 34741

FEI Number: 90-0124942 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PARADA, MANUEL SR
1229 BERMUDA LAKE LANE
301
KISSIMMEE, FL 34741 US

Name and Address of New Registered Agent:

PARADA, MANUEL SR
1221 BERMUDA LAKE LANE
204
KISSIMMEE, FL 34741 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MANUEL PARADA 04/27/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: PARADA, MANUEL D
Address: 1229 BERMUDA LAKE LN #301
City-St-Zip: KISSIMMEE, FL 34741

Title: S ( ) Delete
Name: COLIN, AGUSTIN S
Address: 1229 BERMUDA LAKE LN., #301
City-St-Zip: KISSIMMEE, FL 34741

Title: V ( ) Delete
Name: PARADA, CRISTIAN F
Address: 1229 BERMUDA LAKE LN., #301
City-St-Zip: KISSIMMEE, FL 34741

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: PARADA, MANUEL D
Address: 1221 BERMUDA LAKE LN #204
City-St-Zip: KISSIMMEE, FL 34741

Title: S (X) Change ( ) Addition
Name: COLIN, AGUSTIN S
Address: 1221BERMUDA LAKE LN., #204
City-St-Zip: KISSIMMEE, FL 34741

Title: V (X) Change ( ) Addition
Name: PARADA, CRISTIAN F
Address: 1221 BERMUDA LAKE LN., #204
City-St-Zip: KISSIMMEE, FL 34741

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MANUEL PARADA PD 04/27/2005
Electronic Signature of Signing Officer or Director Date