2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000128397

City-St-Zip:

DADE CITY, FL 33523

Entity Name: TOO JAWS DRYWALL, INC.

FILED May 18, 2005 Secretary of State

Littly Nai	iie. 100 s	AVVS DR I VVALL, IIV	vC.					
Current Principal Place of Business:				New Principal Place of Business:				
18514 BRA DADE CIT	ADSHAW Y, FL 3352	3						
Current Mailing Address:				New Mailing Address:				
P.O. BOX DADE CIT	707 Y, FL 3352	6						
FEI Number:	35-2219827	FEI Number App	lied For() FEI N	lumber Not App	licable ()	Certificate of Status Desi	red()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:				
NELSON, P.O. BOX DADE CIT		6 US						
The above in the State	named ent of Florida.	ity submits this state	ment for the purpose	e of changing i	ts registered	office or registered agen	t, or both,	
SIGNATUR	RE:							
	Elect	ronic Signature of R	egistered Agent		Date			
		.193(2)(b), F.S., the co	rporation did not receiv bution ().	e the prior notic	e.			
OFFICERS	S AND DIR	ECTORS:		ADDITION	IS/CHANGE	S TO OFFICERS AND D	IRECTORS:	
Title: Name: Address: City-St-Zip:	D,P NELSON, R 18514 BRA DADE CITY	DSHAW		Title: Name: Address: City-St-Zip:	() Change ()Addition		
Title: Name: Address: City-St-Zip:	VP,D KIMBRIL, C 1203 ATLAN POINCIANA	ITIC CT		Title: Name: Address: City-St-Zip:	VP,D (KIMBRIL, CAI 18514 BRADS DADE CITY, F	SHAW		
Title: Name: Address:	S,D KIMBRIL, D 18514 BRA			Title: Name: Address:	() Change () Addition		

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.

City-St-Zip:

SIGNATURE: ROGER NELSON P 05/18/2005