

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jul 11, 2007 8:00 am**  
**Secretary of State**

07-11-2007 90074 026 \*\*\*150.00

**DOCUMENT # P03000130552**

1. Entity Name  
**MESA DRYWALL, INC.**



Principal Place of Business  
**11478 SW 74 TERRACE  
MIAMI, FL 33173-2616**

Mailing Address  
**11478 SW 74 TERRACE  
MIAMI, FL 33173-2616**



07022007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**56-2415759**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**ORTIZ, NANCY  
7751 S.W. 26TH STREET  
MIAMI, FL 33155**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reissuing)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$550.00  
Due by September 14, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P  
MESA, SAUL  
11478 SW 74TH TERRACE  
MIAMI, FL 331732616**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**S  
MESA, MARIA E  
11478 SW 74TH TERRACE  
MIAMI, FL 331732616**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7/15/07**  
Date

**305-598-5489**  
Daytime Phone #

# ATTACHMENT

**Mesa Drywall Inc.**  
**11478 SW 74 Terrace**  
**Miami, FL 33173**  
**Phone 305-598-5489**

40124160  
#P03 000130552

Division of Corporations  
P.O. Box 6198  
Tallahassee, FL  
32314

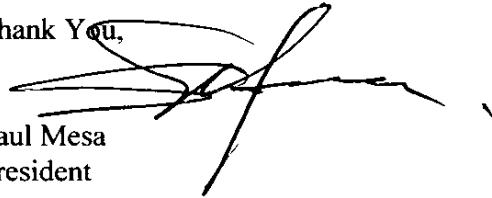
RE: \$400.00 Late Fee

To whom it may concern:

Please note that we never received the original notice. We are now being charged a late fee. Enclosed please find the required documents along with the required payment.

Thank You,

Saul Mesa  
President

A handwritten signature in black ink, appearing to be 'Saul Mesa', written over the printed name and title.