

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2004 8:00 am
Secretary of State

03-26-2004 90034 010 ***150.00

DOCUMENT # P03000132355

1. Entity Name
HUARACHA DRYWALL, INC



Principal Place of Business
**750 BURCH AVE.
WINTER GARDEN, FL 34787**

Mailing Address
**750 BURCH AVE.
WINTER GARDEN, FL 34787**

34037091



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03152004 Chg-P CR2E034 (10/03)

City & State

City & State

4. FEI Number
20-0469357

Applied For
Not Applied

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SANCHEZ, ROSA H
750 BURCH AVE.
WINTER GARDEN, FL 34787**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **SANCHEZ, ROSA H**
STREET ADDRESS **750 BURCH AVE.**
CITY-ST-ZIP **WINTER GARDEN, FL 34787**

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VP** ☒ Delete
NAME **REYNAGA, IGNACIO**
STREET ADDRESS **750 BURCH AVE.**
CITY-ST-ZIP **WINTER GARDEN, FL 34787**

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **S** ☒ Delete
NAME **MELENDEZ, SERGIO**
STREET ADDRESS **750 BURCH AVE.**
CITY-ST-ZIP **WINTER GARDEN, FL 34787**

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **T** ☒ Delete
NAME **TORRES, JOSE R**
STREET ADDRESS **750 BURCH AVE.**
CITY-ST-ZIP **WINTER GARDEN, FL 34787**

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Rosa Huaracha S.**

3/24/04 (321) 689-8645