

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000139386

Entity Name: DOVAL DRYWALL , CORP.

FILED
Sep 30, 2005
Secretary of State

Current Principal Place of Business:

525 FLORIDA CIR NORTH
APOLLO BEACH, FL 33572

New Principal Place of Business:

Current Mailing Address:

525 FLORIDA CIR NORTH
APOLLO BEACH, FL 33572

New Mailing Address:

FEI Number: 20-0420325

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALDEZ, DORA N
525 FLORIDA CIR NORTH
APOLLO BEACH, FL 33572 US

Name and Address of New Registered Agent:

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: DORA N. VALDEZ

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VALDEZ, DORA N
Address: 525 FLORIDA CIR NORTH
City-St-Zip: APOLLO BEACH, FL 33572

Title: VP () Delete
Name: RAMIREZ, REYNA
Address: 8510 GIBSONTON DR LOT #12
City-St-Zip: GIBSONTON, FL 33534

Title: T () Delete
Name: ALBARANZ, GILDARDO
Address: 11211 EAST BAY LOT #72
City-St-Zip: GIBSONTON, FL 33534

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: VEGA, FILIBERTO
Address: 525 FLORIDA CIR NORTH
City-St-Zip: APOLLO BEACH, FL 33572

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: DORA N. VALDEZ

Electronic Signature of Signing Officer or Director

P

09/30/2005

Date