2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2005 8:00 am
Secretary of State
03-02-2005 90074 034 ***150.00

DOCUMENT # P03000146858

1. Entity Name
SANTOS MUNOZ DRYWALL INC.

Principal Place of Business	Mailing Address
P.O. BOX 863 ZELLWOOD, FL 32798	P.O. BOX 863 ZELLWOOD, FL 32798

66011099

02222005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
47-0935740
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

PORTILLO, SANTOS R
7008 HOLLY ST.
ZELLWOOD, FL 32798

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

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

4/14/2005

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	PORTILLO, SANTOS R
STREET ADDRESS	7008 HOLLY ST.
CITY-ST-ZIP	ZELLWOOD, FL 32798
TITLE	S
NAME	PORTILLO, JUAN C
STREET ADDRESS	7003 HOLLY ST
CITY-ST-ZIP	ZELLWOOD, FL 32798
TITLE	VP
NAME	PORTILLO, MIGUEL A
STREET ADDRESS	7003 HOLLY ST
CITY-ST-ZIP	ZELLWOOD, FL 32798
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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SANTOS ROGELIO PORTILLO MUÑOS 4/19/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #