2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000147428

Entity Name: MIGUEL DRYWALL, INC.

FILED Nov 01, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1745 WHITE CLOUD AVENUE APOPKA, FL 32712

Current Mailing Address: New Mailing Address:

1745 WHITE CLOUD AVENUE 2612 SWANSON DR APOPKA, FL 32712 DELTONA, FL 32738

FEI Number: 38-3694514 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

AGUILAR, JODI
1745 WHITE CLOUD AVENUE
APOPKA, FL 32712 US

AGUILAR, JODI
2612 SWANSON DR
DELTONA, FL 32738 US

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: JODI AGUILAR 11/01/2004

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:

Name: Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 AGUILAR, MIGUEL
 Name:
 AGUILAR, MIGUEL

 Address:
 1745 WHITE CLOUD AVENUE
 Address:
 2161 SWANSON DRIVE

 City-St-Zip:
 APOPKA, FL 32712
 City-St-Zip:
 DELTONA, FL 32738

Title: VP () Delete Title: () Change () Addition

 Name:
 GARDINO, JUAN
 Name:

 Address:
 1745 WHITE CLOUD AVENUE
 Address:

 City-St-Zip:
 APOPKA, FL 32712
 City-St-Zip:

 Name:
 AGUILAR, JODI
 Name:
 AGUILAR, JODI

 Address:
 1745 WHITE CLOUD AVENUE
 Address:
 2161 SWANSON DR

 City-St-Zip:
 APOPKA, FL 32712
 City-St-Zip:
 DELTONA, FL 32738

Title: T () Delete Title: () Change () Addition

HERNANDEZ, DIEGO Name:
1745 WHITE CLOUD AVENUE Address:
APOPKA, FL 32712 City-St-Zip:

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: JODI AGUILAR S 11/01/2004