


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 03, 2004 8:00 am**  
**Secretary of State**

05-03-2004 90741 028 \*\*\*150.00

<b>DOCUMENT # P04000002479</b>					
<b>1. Entity Name</b> MAXTON METAL AND DRYWALL, INC.					
<b>Principal Place of Business</b> 137 POWELL BLVD. 15-102 DAYTONA BEACH, FL 32114 US			<b>Mailing Address</b> 137 POWELL BLVD. 15-102 DAYTONA BEACH, FL 32114 US		
<b>2. Principal Place of Business</b> 205 Ekana Circle Suite, Apt. #, etc.			<b>3. Mailing Address</b> 205 Ekana Circle Suite, Apt. #, etc.		
<b>City &amp; State</b> Daytona Beach, FL Zip: 32124 Country: USA		<b>City &amp; State</b> Daytona Beach, FL Zip: 32124 Country: USA		<b>4. FEI Number</b> 37-1482865	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				<b>Applied For</b> Not Applicable	
<b>6. Name and Address of Current Registered Agent</b> BOWMAN, FRED J 137 POWELL BLVD. 15-102 DAYTONA BEACH, FL 32114			<b>7. Name and Address of New Registered Agent</b> Name: _____ Street Address (P.O. Box Number is Not Acceptable): _____ City: _____ FL Zip Code: _____		
<b>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.</b> SIGNATURE: <u>Fred J. Bowman</u> DATE: <u>4/30/04</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>		<b>9. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE: PRES NAME: BOWMAN, FRED J STREET ADDRESS: 137 POWELL BLVD., 15-102 CITY-ST-ZIP: DAYTONA BEACH, FL 32114	<input type="checkbox"/> Delete		TITLE: _____ NAME: _____ STREET ADDRESS: 205 Ekana Circle CITY-ST-ZIP: Daytona Beach, FL 32124	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Delete		TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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<b>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.</b>					
<b>SIGNATURE:</b> <u>Fred J. Bowman</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date: <u>4/30/04</u>		Daytime Phone #: <u>386 5278432</u>