2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000007244

Entity Name: APARICIO DRYWALL INC

FILED Apr 20, 2005 Secretary of State

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

2007 LOCUST BERRY DR 6250 SW 9 STREET KISSIMMEE, FL 34743 MARGATE, FL 33068

Current Mailing Address: New Mailing Address:

2007 LOCUST BERRY DR 6250 SW 9 STREET KISSIMMEE, FL 34743 MARGATE, FL 33068

FEI Number: 20-5763995 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:

APARICIO, EBER E MALDONADO, ANTONIO
2007 LOCUST BERRY DR 6250 SW 9 STREET
KISSIMMEE, FL 34743 US MARGATE, FL 33068 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: ANTONIO MALDONADO 04/20/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: PD (X) Change () Addition Name: MALDONADO, ANTONIO Name: MALDONADO, ANTONIO

 Name:
 MALDONADO, ANTONIO
 Name:
 MALDONADO, ANTONIO

 Address:
 625 SW 9 PL
 Address:
 6250 SW 9 STREET

 City-St-Zip:
 MARGATE, FL 33068
 City-St-Zip:
 MARGATE, FL 33068

Title: VP () Delete Title: TD (X) Change () Addition Name: LOPEZ, CARLOS H Name: LOPEZ, CARLOS H

Address: 601 FLORIDA PARKWAY
City-St-Zip: KISSIMMEE, FL 34743
City-St-Zip: KISSIMMEE, FL 34743

Title: VPT () Delete Title: VPD (X) Change () Addition

 Name:
 GARCIA, PAZ Á
 Name:
 GARCIA, PAZ Á

 Address:
 LOGO MESA WAY
 Address:
 LOGO MESA WAY

 City-St-Zip:
 KISSIMMEE, FL 34743
 City-St-Zip:
 KISSIMMEE, FL 34743

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: ANTONIO MALDONADO P 04/20/2005