

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000007802

Entity Name: GAALONZ DRYWALL, INC.

FILED
Apr 28, 2007
Secretary of State

Current Principal Place of Business:

8910 TANGLEWOOD PL., #722
TEMPLE TERR., FL 33617

New Principal Place of Business:

1225 COOLMONT DR.
BRANDON, FL 33511

Current Mailing Address:

8910 TANGLEWOOD PL., #722
TEMPLE TERR., FL 33617

New Mailing Address:

1225 COOLMONT DR.
BRANDON, FL 33511

FEI Number: 58-2682193

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALAS, GABRIEL F
8910 TANGLEWOOD PL., #722
TEMPLE TERR., FL 33617 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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SALAS, GABRIEL F
Address: 8910 TANGLEWOOD PL., #722
City-St-Zip: TEMPLE TERR., FL 33617

Title: STD () Delete
Name: SALAS, ROMY S
Address: 8910 TANGLEWOOD PL., #722
City-St-Zip: TEMPLE TERR., FL 33617

Title: VD () Delete
Name: SALAS, ALEJANDRO S
Address: 8910 TANGLEWOOD PL., #722
City-St-Zip: TEMPLE TERR., FL 33617

Title: VD () Delete
Name: SALAS, JOSE L
Address: 8910 TANGLEWOOD PL #722
City-St-Zip: TAMPA, FL 33617

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SALAS, GABRIEL F
Address: 1225 COOLMONT DR.
City-St-Zip: BRANDON, FL 33511

Title: STD (X) Change () Addition
Name: SALAS, ROMY S
Address: 1225 COOLMONT DR.
City-St-Zip: BRANDON, FL 33511

Title: VD (X) Change () Addition
Name: SALAS, ALEJANDRO S
Address: 8910 TANGLEWOOD PL. #722
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: VD (X) Change () Addition
Name: SALAS, JOSE L
Address: 8910 TANGLEWOOD PL. #722
City-St-Zip: TEMPLE TERRACE, FL 33617

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: GABRIEL F. SALAS

PD

04/28/2007

Electronic Signature of Signing Officer or Director

Date