

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 04, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000010136

1. Entity Name
MJV DRYWALL, INC



Principal Place of Business
**3103 PELL MELL DRIVE
ORLANDO, FL 32818**

Mailing Address
**3103 PELL MELL DRIVE
ORLANDO, FL 32818**



05012006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0599015

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**VALERIANO, MODESTO
5720 GULF CLUB PARKWAY
ORLANDO, FL 32808**

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000561976
05/19/06-80087-008 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	VALERIANO, MODESTO
STREET ADDRESS	5720 GULF CLUB PARKWAY
CITY-ST-ZIP	ORLANDO, FL 32808

TITLE	V
NAME	ZAMBRANO, MAYRA
STREET ADDRESS	5720 GULF CLUB PARKWAY
CITY-ST-ZIP	ORLANDO, FL 32808

TITLE	S
NAME	ZAMBRANO, MIGUEL A
STREET ADDRESS	4313 BRITTANY RD
CITY-ST-ZIP	ORLANDO, FL 32808

TITLE	T
NAME	ZAMBRANO, VICENTE
STREET ADDRESS	4313 BRITTANY RD
CITY-ST-ZIP	ORLANDO, FL 32808

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 exemptions contained 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 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/06

Date

Daytime Phone # _____