

# **2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P04000049246

Entity Name: BARRERAS DRYWALL, INC.

**FILED**  
**Jun 18, 2009**  
**Secretary of State**

## **Current Principal Place of Business:**

319 BUTTONWOOD DR  
KISSIMMEE, FL 34743

## **New Principal Place of Business:**

## **Current Mailing Address:**

319 BUTTONWOOD DR  
103  
KISSIMMEE, FL 34743

## **New Mailing Address:**

319 BUTTONWOOD DR  
KISSIMMEE, FL 34743

FEI Number: 54-2452434

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

BARRERA, ZULMA L  
319 BUTTONWOOD DR  
KISSIMMEE, FL 34743 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

## **OFFICERS AND DIRECTORS:**

Title: VP ( ) Delete  
Name: BARRERA, NOE  
Address: 319 BUTTONWOOD DR  
City-St-Zip: KISSIMMEE, FL 34743

Title: P ( ) Delete  
Name: BARRERA, ZULMA L  
Address: 319 BUTTONWOOD DR  
City-St-Zip: KISSIMMEE, FL 34743

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## **ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP ( ) Change (X) Addition  
Name: CORREDOR, IVAN D  
Address: 319 BUTTONWOOD DR  
City-St-Zip: KISSIMMEE, FL 34743

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: ZULMA L BARRERA

P

06/18/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date