

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000064664

**FILED**  
**Feb 13, 2006**  
**Secretary of State**

**Entity Name:** LEAL DRYWALL, CORP.

**Current Principal Place of Business:**

4394 NW 9TH AVE  
329 2A BLDG 20  
POMPANO BEACH, FL 33064 US

**New Principal Place of Business:**

941 NW 45TH STREET  
UNIT 08  
POMPANO BEACH, FL 33064 US

**Current Mailing Address:**

4394 NW 9TH AVE  
329 2A BLDG 20  
POMPANO BEACH, FL 33064 US

**New Mailing Address:**

941 NW 45TH STREET  
UNIT 08  
POMPANO BEACH, FL 33064 US

**FEI Number:** 20-1023173

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEAL, GLEISON F  
4394 NW 9TH AVE  
329 2A BLDG 20  
POMPANO BEACH, FL 33064 US

**Name and Address of New Registered Agent:**

LEAL, GLEISON F  
941 NW 45TH STREET  
UNIT 08  
POMPANO BEACH, FL 33064 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: GLEISON F LEAL

02/13/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: LEAL, GLEISON F  
Address: 4394 NW 9TH AVE #329 2A BLDG. 20  
City-St-Zip: POMPANO BEACH, FL 33064 US

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

Title: P,D (X) Change ( ) Addition  
Name: LEAL, GLEISON F  
Address: 941 NW 45TH STREET, UNIT 08  
City-St-Zip: POMPANO BEACH, FL 33064 US

I hereby certify that the information supplied with this filing does not qualify for the 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: GLEISON F LEAL

P,D

02/13/2006

Electronic Signature of Signing Officer or Director

Date