## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000076671

Entity Name: SO DRYWALL, INC.

FILED Jun 21, 2005 Secretary of State

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

9109 BAY MEADOW CT 8732 HEMPDEN DR TAMPA, FL 33615 TAMPA, FL 33626

Current Mailing Address: New Mailing Address:

9109 BAY MEADOW CT 8732 HEMPDEN DR TAMPA, FL 33615 TAMPA, FL 33626

FEI Number: 20-1118162 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:

SULVARAN, JAMES
9109 BAY MEADOW CT
TAMPA, FL 33615 US
SULVARAN, JAMES
8732 HEMPDEN DR
TAMPA, FL 33626 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: JAMES SULVARAN 06/21/2005

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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 SULVARAN, JAMES
 Name:
 SULVARAN, JAMES

 Address:
 9109 BAY MEADOW CT
 Address:
 8732 HEMPDEN DR

 City-St-Zip:
 TAMPA, FL 33615
 City-St-Zip:
 TAMPA, FL 33626

Title: MNGR (X) Delete Title: ( ) Change ( ) Addition

 Name:
 OBANDO, JORGE I
 Name:

 Address:
 9109 BAY MEADOW CT
 Address:

 City-St-Zip:
 TAMPA, FL 33615
 City-St-Zip:

Title: MNGR (X) Delete Title: ( ) Change ( ) Addition

 Name:
 FERREL, LUIS A
 Name:

 Address:
 9109 BAY MEADOW CT
 Address:

 City-St-Zip:
 TAMPA, FL 33615
 City-St-Zip:

Title: MNGR (X) Delete Title: ( ) Change ( ) Addition

 Name:
 AMAYO, EZEQUIEL
 Name:

 Address:
 9109 BAY MEADOW CT
 Address:

 City-St-Zip:
 TAMPA, FL 33615
 City-St-Zip:

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: JAMES SULVARAN P 06/21/2005