

P04000082781

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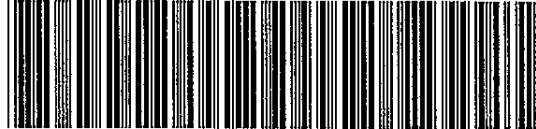
(Business Entity Name)

(Document Number)

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2004 MAY 24 A 10:02-2

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LAZARUS CORPORATE FILING SERVICE

3320 S.W. 87 AVENUE

MIAMI, FLORIDA (305)552-5973

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. DRYWALL EXPERT CORP.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time

2:00

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☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

May 21, 2004

LAZARUS

SUBJECT: DRYWALL EXPERT CORP.
Ref. Number: W04000019796

We have received your document for DRYWALL EXPERT CORP.. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is P01000097724.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6934.

Loria Poole
Document Specialist
New Filings Section

Letter Number: 604A00035943

FILE
MAY 24 10 42 AM '04
STATE
SECRETARY OF STATE

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation:

ARTICLE I (NAME)

The name of the corporation shall be:

DRYWALL EXPERT *USA CORP.*

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2004 MAY 24 A 10:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

7415 S.W.39 TERRACE. MIAMI.FL. 33155

ARTICLE III- SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any time is:

500

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and address of the initial registered agent is:

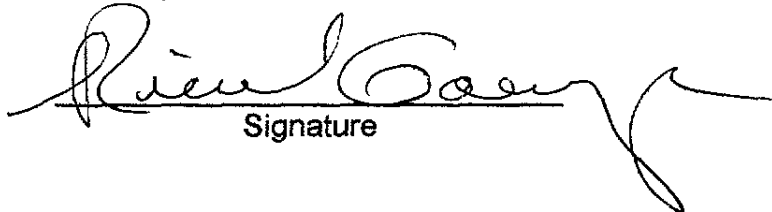
JACOBO VILLAR. 8035 S.W. 15 STREET.MIAMI.FL.33144

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

RICARDO J GOENAGA 7415 S.W. 39 TERRACE MIAMI.FLA. 33155

The undersigned incorporator has executed these Articles of Incorporation this
19th day of MAY , 2004


Signature

ARTICLE VI - DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are):

RICARDO J GOENAGA 7415 S.W. 39 TERRACE MIAMI.FL.33155.

PRESIDENT

RAUL FRAGA .7415 S.W. 39 TERRACA MIAMI.FL.33155 VICE-PRESIDENT

**CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED
OFFICE**

Having been named as Registered Agent and to except service of process for the above stated corporation at place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in the capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as a Registered Agent.


Registered Agent Signature

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TALLAHASSEE, FLORIDA