2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000145162

Entity Name: MHL DRYWALL INC.

FILED Sep 12, 2005 Secretary of State

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

243 BEAL PARKWAY 346 BONITA AVE #102

FORT WALTON BEACH, FL 32548 US FORT WALTON BEACH, FL 32548 US

Current Mailing Address: New Mailing Address:

243 BEAL PARKWAY P O BOX 4926

FORT WALTON BEACH, FL 32548 US FORT WALTON BEACH, FL 32549 US

FEI Number: 20-1793469 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:

FANELLA, NICHOLAS R 434 TANGLEWOOD DRIVE FORT WALTON BEACH, FL 32547 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:

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

Name: GARCIA, MARCELO JR Name: GARCIA, MARCELO JR Address: 243 BEAL PARKWAY Address: 346 BONITA AVE #102

City-St-Zip: FORT WALTON BEACH, FL 32548 US City-St-Zip: FORT WALTON BEACH, FL 32548 US

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

Name: GALLARDO, HUGO Name: GALLARDO, HUGO Address: 243 BEAL PARKWAY Address: 346 BONITA AVE #102

City-St-Zip: FORT WALTON BEACH, FL 32548 US City-St-Zip: FORT WALTON BEACH, FL 32548 US

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

 Name:
 GALLARDO, LUIS
 Name:
 GALLARDO, LUIS

 Address:
 243 BEAL PARKWAY
 Address:
 346 BONITA AVE 102

City-St-Zip: FORT WALTON BEACH, FL 32548 US City-St-Zip: FORT WALTON BEACH, FL 32548 US

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: MARCELO GARCIA PRES 09/12/2005