

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000169512

Entity Name: IV DRYWALL INC.

FILED
Jun 14, 2005
Secretary of State

Current Principal Place of Business:

571 E. NORMANDY BLVD.
DELTONA, FL 32725

New Principal Place of Business:

822 PICKFORD CT.
DELTONA, FL 32725 US

Current Mailing Address:

571 E. NORMANDY BLVD.
DELTONA, FL 32725

New Mailing Address:

822 PICKFORD CT.
DELTONA, FL 32725 US

FEI Number: 20-2989776

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALVIZO, ISIDRO
571 E. NORMANDY BLVD.
DELTONA, FL 32725 US

Name and Address of New Registered Agent:

ALVIZO, ISIDRO
822 PICKFORD CT
DELTONA, FL 32725 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: ISIDRO ALVIZO

06/14/2005

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:

Title: PD () Delete
Name: ALVIZO, ISIDRO
Address: 571 E. NORMANDY BLVD
City-St-Zip: DELTONA, FL 32725

Title: VD () Delete
Name: RODRIGUEZ, VICTOR M
Address: 571 E. NORMANDY BLVD
City-St-Zip: DELTONA, FL 32725

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ALVIZO, ISIDRO
Address: 822 PICKFORD CT.
City-St-Zip: DELTONA, FL 32725 US

Title: SD (X) Change () Addition
Name: RIVERA, JOSE F
Address: 2169 N. NORMANDY BLVD.
City-St-Zip: DELTONA, FL 32725 US

Title: TD () Change (X) Addition
Name: CASTANEDA, JOSE A
Address: 2169 N. NORMANDY BLVD.
City-St-Zip: DELTONA, FL 32725 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: ISIDRO ALVIZO

PD

06/14/2005

Electronic Signature of Signing Officer or Director

Date