2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Apr 28, 2007
Secretary of State

DOCUMENT# P05000012162

Entity Name: X & F DRYWALL CORP

Current Principal Place of Business:

2088 GUAVA LN
BUNNELL, FL 32110 US

New Principal Place of Business:

36 PERROTTI LN
PALM COAST, FL 32164 US

Current Mailing Address:

2088 GUAVA LN
BUNNELL, FL 32110 US

New Mailing Address:

36 PERROTI LN
PALM COAST, FL 32164 US

FEI Number: 20-2208340 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

XOCHIPA FLORES, CATARINO
2088 GUAVA LN
BUNNELL, FL 32110 US

Name and Address of New Registered Agent:

XOCHIPA FLORES, CATARINO
36 PERROTTI LN
PALM COAST, FL 32164 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: CATARINO XOCHIPA FLORES 04/28/2007
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: XOCHIPA FLORES, CATARINO
Address: 2088 GUAVA LN
City-St-Zip: BUNNELL, FL 32110 US

Title: V ( ) Delete
Name: XOCHIPA, JUAN
Address: 2088 GUAVA LANE
City-St-Zip: ORLANDO, FL 32110

Title: S ( ) Delete
Name: HERNANDEZ, JOSE A
Address: 29 BAY SPRING PL
City-St-Zip: PALM COAST, FL US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: XOCHIPA FLORES, CATARINO
Address: 36 PERROTTI LN
City-St-Zip: PALM COAST, FL 32164 US

Title: V (X) Change ( ) Addition
Name: XOCHIPA, JUAN
Address: 36 PERROTTI LN
City-St-Zip: PALM COAST, FL 32164 US

Title: S (X) Change ( ) Addition
Name: HERNANDEZ, JOSE A
Address: 36 PERROTTI LN
City-St-Zip: PALM COAST, FL 32164 US

I hereby certify that the information supplied with this filing does not qualify 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: CATARINO XOCHIPA FLORES P 04/28/2007
Electronic Signature of Signing Officer or Director Date