

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # P06000045515

1. Entity Name

TRINITY DRYWALL & FINISHING CORPORATION



FILED

08 SEP 12 PM 1:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

1136 PINE ISLAND
SUITE 37
CAPE CORAL FL 33909
US

Mailing Address

1136 PINE ISLAND
SUITE 37
CAPE CORAL FL 33909
US

2. Principal Place of Business - No P.O. Box #

1136 Pine Island Rd

3. Mailing Address

Suite # 8

Suite, Apt. #, etc.

City & State
Cape Coral, FL

Suite, Apt. #, etc.

City & State

Zip

33993

Country

Lee

Zip

Country

2nd MOORE

CR2E034 (4/08)

4. FEI Number

20-4592565

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FIGUEROA, BRENDA
1136 PINE ISLAND
SUITE # 37
CAPE CORAL FL 33909

7. Name and Address of New Registered Agent

Name Brenda Figueroa

Street Address (P.O. Box Number is Not Acceptable)
1136 Pine Island Rd. #8

City Cape Coral

FL

Zip Code 33909

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Brenda Figueroa* Brenda Figueroa

9-3-2008

FILE NOW!!! FEE IS \$550.00

DUE BY September 3, 2008

Make Check Payable to Florida Department of State

S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. ☐

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME FIGUEROA, BRENDA R
STREET ADDRESS 105 NE 9TH PLACE
CITY-ST-ZIP CAPE CORAL FL 33909

TITLE V ☒ Delete
NAME FIGUEROA, BRENDA R
STREET ADDRESS 105 NE 9TH PLACE
CITY-ST-ZIP CAPE CORAL FL 33909

TITLE ST ☒ Delete
NAME FIGUEROA, BRENDA R
STREET ADDRESS 105 NE 9TH PLACE
CITY-ST-ZIP CAPE CORAL FL 33909

TITLE D ☒ Delete
NAME RAMOS, NORMA
STREET ADDRESS 515 NE 19 PL
CITY-ST-ZIP CAPE CORAL FL 33909

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Change ☐ Addition
NAME Brenda Figueroa
STREET ADDRESS 1136 Pine Island Rd #8 Cape Coral
CITY-ST-ZIP FL 33909

TITLE " ☒ Change ☐ Addition
NAME 700136246257
STREET ADDRESS 09/23/08--01014--016 **550.00
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D. ☒ Change ☐ Addition
NAME Norma Ramos
STREET ADDRESS 1136 Pine Island Rd #8 Cape Coral
CITY-ST-ZIP FL 33909

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Brenda Figueroa* Brenda Figueroa 9/3/08 239-242-8493

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #