## 2008 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P07000116279

Entity Name: HEAVENLY DRYWALL INC

FILED Oct 30, 2008 Secretary of State

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

346 GLADYS STREET 2 REGENCY PARK DRIVE

FORT WALTON BEACH, FL 32547 US MARY ESTHER, FL 32569 US

Current Mailing Address: New Mailing Address:

346 GLADYS STREET 2 REGENCY PARK DRIVE FORT WALTON BEACH, FL 32547 US MARY ESTHER, FL 32569 US

FEI Number: 26-1293051 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: NICHOLAS FANELLA

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:
 CHACON, JUSTINO
 Name:
 CHACON, JUSTINO

 Address:
 346 GLADYS STREET
 Address:
 2 REGENCY PARK DRIVE

City-St-Zip: FORT WALTON BEACH, FL 32547 US City-St-Zip: FORT WALTON BEACH, FL 32569 US

 Name:
 ROMERO, MANZURI
 Name:
 ROMERO, MANZURI

 Address:
 346 GLADYS STREET
 Address:
 2 REGENCY PARK DRIVE

 City-St-Zip:
 FORT WALTON BEACH, FL 32547 US
 City-St-Zip:
 MARY ESTHER, FL 32569 US

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

 Name:
 RAMIREZ, MANUEL
 Name:
 RAMIREZ, MANUEL

 Address:
 346 GLADYS STREET
 Address:
 2 REGENCY PARK DRIVE

 City-St-Zip:
 FORT WALTON BEACH, FL 32547 US
 City-St-Zip:
 MARY ESTHER, FL 32569 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: JUSTINO CHACON PSD 10/30/2008