

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000026261

Entity Name: BAYSTATE DRYWALL, INC.

FILED  
Jan 23, 2007  
Secretary of State

## Current Principal Place of Business:

4851 SW 111 TERRACE  
FORT LAUDERDALE, FL 33328 US

## New Principal Place of Business:

4851 SW 111 TERRACE  
DAVIE, FL 33328 US

## Current Mailing Address:

4851 SW 111 TERRACE  
FORT LAUDERDALE, FL 33328 US

## New Mailing Address:

4851 SW 111 TERRACE  
DAVIE, FL 33328 US

FEI Number: 65-0406884

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PARE, CLAUDE  
4851 SW 111 TERRACE  
FORT LAUDERDALE, FL 33328 US

## Name and Address of New Registered Agent:

PARE, CLAUDE  
4851 SW 111 TERRACE  
DAVIE, FL 33328 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:

01/23/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: PARE, CLAUDE  
Address: 4851 SW 111 TERRACE  
City-St-Zip: FORT LAUDERDALE, FL 33328

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: PARE, CLAUDE  
Address: 4851 SW 111 TERRACE  
City-St-Zip: DAVIE, FL 33328

I hereby certify that the information supplied with this filing does not qualify for the 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: CLAUDE PARE

PRES

01/23/2007

Electronic Signature of Signing Officer or Director

Date