2004 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Apr 29, 2004 08:00 AM Secretary of State DOCUMENT # P93000056991 INTERIOR DRYWALL CO., INC. Principal Place of Business Mailing Address 711 S.W. 67TH TERRACE 711 S.W. 67TH TERRACE PEMBROKE PINES, FL 33023 PEMBROKE PINES, FL 33023 02262004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0431975 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent AGUILER, JOSE DO NOT WRITE 711 S.W. 67 TERR. PEMBROKE PINES, FL 33023 IN THIS SPACE 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. Signature, lyped or printed name of registered agent and tale if applicable (NOTE: Registered Agent suggeture required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE PS AGUILAR, JOSE M NAVE STREET ADDRESS 711 SW 67 TERR. PEMBROKE PINES, FL 33023 CITY-ST-ZIP TITLE AGUILAR, MAYRA STREET ADDRESS 711 SW 67 TERR. CITY-ST-ZIP PEMBROKE PINES, FL 33023 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. Thereby certify that the information supplied with this filling does not qualify 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 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 fustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURE

MAM STREET ADDRESS CMY-ST-ZP TITLE NAME STREET AUDRESS CITY-ST-ZIP