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CORPORATION ANNUAL REPORT

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FLORIDA DEPARTMENT OF STATE

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Mar 23 1998 8:00am

CR2E034

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Secretary of State 1998 DOCUMENT # P96000027988 (0) C & C DRYWALL CORPORATION INC Principal Place of Business Mailing Address 3037 NW 92ND ST 3037 NW 92ND ST MIAM: FL 33147 MIAMI FL 33147 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/25/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0659578 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Zıp Country This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CERRATO, CARLOS 3037 NW 92ND ST Street Address (P.O. Box Number is Not Acceptable) 82 **MIAMI FL 33147** 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agont, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature typed or printed name of registered agent and title if applicable INOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE CERRATO, CARLOS NAME 1.2 NAME 3037 NW 92ND ST STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33147** CITY-SY-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME CERRATO, MARTA 2.2 NAME 3037 NW 92ND ST STREET ADDRESS 2.3 STREET ADDRESS **MIAMI FL 33147** CITY-ST-71P 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-7IP 4.4 CITY - ST - ZIP ... DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CiTY - ST - ZiP 14. I hereby 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the receiver of trustee empoyered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, or on an attachment with an additional statutes.

(7) 11 1

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