

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P96000031936

Entity Name: JACK,S STILES DRYWALL, INC.

FILED
May 04, 2009
Secretary of State

Current Principal Place of Business:

12515 RIVER RD.
MAKKA CITY, FL 34251

New Principal Place of Business:

Current Mailing Address:

12515 RIVER RD.
MAKKA CITY, FL 34251

New Mailing Address:

FEI Number: 59-3376777

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STILES, CARMEN H
12515 RIVER RD.
MAKKA CITY, FL 34251 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STILES, JACK E
Address: 12515 RIVER RD.
City-St-Zip: MAKKA CITY, FL 34251

Title: DIR () Delete
Name: ZAMARRON, LEOPADO DIRECTO
Address: 12515 RIVER RD.
City-St-Zip: MYAKKA CITY, FL 34251

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DIR () Change (X) Addition
Name: ESQUIVEL, EDER
Address: 12515 RIVER RD.
City-St-Zip: MYAKKA, FL 34251

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: JACK E. STILES

PRES

05/04/2009

Electronic Signature of Signing Officer or Director

Date