

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

May 07 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 1. Corporation Name **196 000053853**

METAL DRYWALL, INC.

Principal Place of Business Mailing Address

16920 N.W. 74 AVE. MIAMI LAKES, FL - 33015

2. Principal Place of Business 21 16920 N.W. 74 AVE. Suite, Apt. #, etc. 22 MIAMI LAKES, FL. City & State Zip Country 24 33015 25 USA	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State Zip Country 29 30
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3. Date Incorporated or Qualified 4. FEI Number 65-0676558 5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	3a. Date of Last Report Applied For Not Applicable
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9. Name and Address of Current Registered Agent

REINALDO ALFARO III
7775 S.W. 8 St. #203
MIAMI, FL - 33144

10. Name and Address of New Registered Agent

81 Name FERNANDO GOMEZ 82 Street Address (P.O. Box Number is Not Acceptable) 229 S.W. 21 St. 83 84 City FORTLAUDERDALE FL 85 Zip Code 33315
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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 agent, 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 *Fernando Gomez* **Fernando Gomez** **4-7-97**

(NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE P/T NAME ILEANA PITALUGA STREET ADDRESS 16920 N.W. 74 AVE. CITY-ST-ZIP MIAMI LAKES - FL - 33015 ☒ DELETE	TITLE V/S NAME LUIS L. REYES STREET ADDRESS 16920 N.W. 74 AVE. CITY-ST-ZIP MIAMI - FL - 33015 ☒ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE	TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE	TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P 1.2 NAME FERNANDO GOMEZ 1.3 STREET ADDRESS 229 S.W. 21 ST. 1.4 CITY-ST-ZIP FORTLAUDERDALE - FL - 33315 ☒ Change ☐ Addition	2.1 TITLE V/S 2.2 NAME CARLOS MALDONADO 2.3 STREET ADDRESS 229 SW 21 ST 2.4 CITY-ST-ZIP FORTLAUDERDALE, FL 33315 ☐ Change ☐ Addition
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP ☐ Change ☐ Addition	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP ☐ Change ☐ Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP ☐ Change ☐ Addition	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing 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 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Fernando Gomez* **4-7-97 - 763-9674**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone

CR2E034 (9/96)