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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 20 1998 8:00am Secretary of State

DOCUMEN I # P96000078794 (0) ROM DRYWALL, INC.									÷
A support of the supp									
Principal Plac		<u> </u>	Mailing	Address		·····) 1011 1 00 5 10	
5405 BIERIOT PLACE RIVERVIEW FL 33569				5405 BIERIOT PLACE RIVERVIEW FL 33569			DO NOT WRITE IN THIS SPACE		
							3. Date Incorporated or Qualified		
							09/23/1996		
2. Principal P	lace of Busin	ness		ling Address			4. FEI Number	 	oplied For
Suite, Apt.	#. etc.		26 Suit	e, Apt. #, etc.			59-3402580		ot Applicable Additional
22			_	27			5. Certificate of Status Desired		equired
City & State	θ			City & State			Election Campaign Financing	\$5.00	May Be
23			28	·			Trust Fund Contribution		to Fees
Zip	Country			Zip Country			8. This corporation owes or has paid the current year Intangible		
24	25 29 29 29 29 29 29 29 29 29 29 29 29 29				30		Personal Property Tax due June 30. 10. Name and Address of New Registered		Ø No
						Name	10, Marile and Address of New Registered	- April	
AMERILAWYER CHARTERED 343 ALMERIA AVENUE						- N - + + - 3	(DO D. M		
		AVEINOE ES FL 33134		82 Str			dress (P.O. Box Number is Not Acceptable)		ł
COMME CADLES PE 33 (34					83				
					84	City	FL	85 Zip	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes						-named co		changing i	ts registered
 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the office or registered agent, or both, in the State of Florida. Such change was author agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida S 						the corpor	ation's board of directors. I hereby accept the app	ointment as	registered
SIGNATURE	Signature, typed	or printed name of registered	agent and lifte if appli	cable (NO	TE: Registered App	nt signature reg	juired when reinstating) DATE		
12.			ND DIRECTOR	<u></u>	13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	RS IN 12
TITLE	PTD			DELETE 1.1 TITLE				☐ Change	Addition
NAME MADRIGAL, ROBERTO OROZO)ZCO	1.2 NAME					ĺ
STREET ADDRESS	0.00 0.01			1.3 STR					
CITY-ST-ZIP				1.4 CITY-ST-ZIP DELETE 21 TITLE		T- ZIP		Change	L_ Addition
TITLE					21 TITLE	ł		Change	L_ Addition
NAME STREET ADDRESS	OROZCO, CONSTANCE 5 5405 BIERIOT PLACE				22 NAME 23 STREET ADDRESS				
CITY-SI-ZIP					2.4 CITY-ST-ZIP				ł
TITLE	DELETE				3.1 TITLE			Change	Addition
NAME					3.2 NAME				
STREET ADDRESS			٠.,		3.3 STREET	ADDRESS			J
CITY-ST-ZIP					3.4. CITY - S	T-ZIP		-	
TITLE				☐ DELETE	4.1 TITLE	1		Change	Addition
NAME					4. 2 NAME				- 1
STREET ADDRESS					4.3 STREET				ļ
CITY-ST-ZIP				DELETE	4.4 CITY-ST 5.1 TITLE	'- ZIP		Change	Addition
TITLE NAME				L OCICIE	5.1 IIILE 5.2 NAME	}		TI OHOUNG	LJ AGGIONI
STREET ADDRESS					5.3 STREET	ADDRESS			
CITY-ST-ZIP					5.4 CITY - S1				
TITLE				DELETE	6.1 TITLE			Change	Addition
NAME					6.2 NAME				
STREET ADDRESS					6.3 STREET	ADDRESS			İ
CITY-ST-ZIP					6.4 CITY-ST	- ZIP			

Thereby 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.