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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 12 1997 8:00am

Secretary of State

Daytime Phone # 0002384

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000098984 (3)

VILLAREAL DRYWALL, INC.

Principal Place of Business

6881 SW 19TH ST POMPANO BEACH FL 33068		6881 SW 19TH ST POMPANO BEACH FL 33068-4814							
						3. Date Incorporated or Qualified 12/09/1996	3a. Da	te of Last F	Report
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number		A	pplied For	
21		26			650711873 Not Applicable			ot Applicable	
Suite, Apt	#, etc	Surte, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State	5	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip 24	Country 25	Zip 29	Country 30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No			
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Re	jistered /	gent	
VILL	AREAL, JERARDO			81	Name				
6881 SW 19TH ST POMPANO BEACH FL 33068				82	Street Ad	ddress (P.O. Box Number is Not Acceptab	le)		
1 011	I AND DEADITIE SOUR			83					
				84	City	**************************************	FL	85 Zip	Code
olfice or r agerit I a SIGNATURE	to the provisions of Sections 607,050 egistered agent, or both, in the State in familiar with, and accept the obligation Signification pointed name of registered age	of Florida. Such change was ations of, Section 607.0505, F	authorize Iorida Stat	d by tutes	the corpo	orporation submits this statement for the p ration's board of directors. I hereby accep	urpose of t the appr	changing ointment as	ts registered registered
12.	OFFICERS AN		13.	u nya	UL PIĞUMICU DI ISI	ADDITIONS/CHANGES TO OFFICE		DIRECTO	RS IN 12
TITLE	PD	DELETE	1,1 T	TLF		ADDITIONO/OTTAINED TO OTTE	EIIO MID	Change	Addition
NAME	VILLAREAL, JERARDO		1.2 N						
STREET ADDIRESS	6881 SW 19TH ST				ADDRESS				
CITY-ST-ZIP	POMPANO BEACH FL 33068		1.3 S						
TITLE	VO	DELETE	2.1 1		1-511			Change	Addition
NAME	ONTIVEROS, ELEAZAR	Land Parker	2.2 N/						
STHEET ACCIDESS	6881 SW 19TH ST				ADDRESS				
CITY - ST - ZIP	POMPANO BEACH FL 33068		- 6		ST - ZIP				
TITLE		DELETE	311		<u></u>			Change	Addition
NAME			3.2 N/	AME			***		
STREET ACURESS			3.3 ST	rreet	ADDRESS				
CITY-ST ZIP			3 4. C	ITY - 9	ST - ZIP				
True		DELETE	4.1 TI					Change	Addition
NAME			4.2 N	AME					
STREET ADDRESS			435	TREET	ADDRESS				•
CHY-ST-ZIP			4 4 C	TY-S	T-ZIP				
TITLE		DELETE	51 TI				.,	Change	Addition
NAME			52 N	AME					
STREET ADORESS			535	TABET	ADDRESS				ı
CHY-ST-ZIP			5 4 CI						
TITLE.		☐ DELETE	61 TI					Change	Addition
NAME			62 N	AME					
STREET ADDRESS			635	raeet	ADDRESS		•		
Col.e. 03 10:				TV .					

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.