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

PROFIT CORPORATION ANNUAL REPORT

1998

**SIGNATURE:** 



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700001215 (7)

Mar 31 1998 8:00am					
Secretary of State					

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S.M. DRYWALL, INC.			E NORMATI NIO HONI (DAN ASINI BRINI BAHA E	BINI BENDA MAND HIPAN HIBAN DAN 1821
				[]]]
Principal Place of Business	Mailing Address		L (AND) IND I INVITED I NOVI (BUIL AND IN AN	Dailt Adaida Leibed abana aidda Bailt Ileas
1801 SOUTHEAST HWY 441	1601 SOUTHEAST HWY 44	<b>¢</b> 1		
LOT 103 LOT 103				
OKEECHOBEE FL 34974	OKEECHOBEE FL 34974		DO NOT WRITE IN	THIS SPACE
			3. Date Incorporated or Qualified 01/06/1997	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		7417170-29	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #. etc.		5. Certificate of Status Desired	\$8.75 Additional
Chuis State	City P. Canto			Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip Country	<b>28</b>	Country	Trust Fund Contribution	Added to Fees
24 26	F-1 -	30	<ol> <li>This corporation owes or has paid the Personal Property Tax due June 30.</li> </ol>	
9, Name and Address of Current		30]	10. Name and Address of New Regist	
CORPORATION SERVICE COMPANY	<del></del>	81 Name	······································	
1904 MAYE STREET			sknand lamothe	
TALLAHASSEE FL 32301-2525		82 Street Address	ess (P.O. Box Number is Not Acceptable)	a. +
1765440065 15 0500 15050		83		
		84 City	LA. ADARDIC	El 85 Zip Code
11. Pursuant to the drovisions of Sections 607 0502	and 607 1508. Florida Statute	s the above-named corn	oration submits this statement for the pure	pose of changing its registered
11. Pursuant to me drovisions of Sections 607 i507 office or registered agent, or both, in the State agent. I am lam lar with, and accept the duliga	of Florid . Such change was at	thorized by the corporati	ion's board of directors. I hereby accept the	ne appointment as registered
/ 791146/14 ()   (1)	May Land 607.0505, Flor	ida Statutes.	50	
		Registered Agent signature require	ed when reinstating)	/04 / 78
12. OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12
TITLE 90	DELETE	1 1 TITLE		Change Addition
NAME PAPINEAU, SERGE		1.2 NAME		
STREET ADDRESS 1601 SE HWY 441, LOT 103		1.3 STREET ADDRESS		
CITY-ST-ZIP OKEECHOBEE FL 34974		1.4 CITY - ST - ZIP		
TITLE D	DELETE	2.1 TITLE		Change Addition
NAME LEDUC, MARIO		2.2 NAME		
STREET ADDRESS 1601 SE HWY 441, LOT 103		2.3 STREET ADDRESS		
CITY-ST-ZIP OKEECHOBEE FL 34974		2. 4 CITY-ST-ZIP		
TITLE	☐ OFLETE	3.1 TITLE	<del></del>	Change Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-SI-ZIP		3 4. CITY-ST-ZIP		
TITLE	☐ DELETE	41 TITLE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY - ST - ZIP		
TITLE	☐ DELETE	5.1 TITLE		Change  Addition
NAME		5.2 NAME		
STREET ADDRESS		5 3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE	DELETE	6.1 TITLE		Change Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
notiver tip		EACITY OF 7ID		

14. I 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 13 if changed, or on an attachment with an address.

03/09/98