2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P99000007556

1. Entity Name

R.I. DRY WALL INC.

SIGNATURE:



FILED Jan 13, 2003 8:00 am Secretary of State 01-13-2003 90139 010 ***158.75

| n.J. Dhi | VVALL, INC. | | | | | | | | | | |
|---|---|----------------|---|-------|------------------------|---|---|--------------|-------------------------|-------------------------------|--|
| Principal Plac 1545 BRAYTO DELTONA FL | | 1545 B | Mailing Address 1545 BRAYTON CIR DELTONA FL 32725 | | | | | | | | |
| 2. Principal P | Place of Business | 3. Mailir | 3. Mailing Address | | | | | | | | |
| Suite, Apt. | Box 5251 | Suite, | Suite, Apt. #, etc. | | | | CHECK HERE IF MAKING CHANGES | | | | |
| ity & State | ma FC. | City 8 | State | FL. | <u> </u> | 4 | . FEI Number 59-3554843 | , | | Applied For Not Applicable | |
| 32728 | S Country Volution | 32 | 128 | Coun | try)Sia_ | 5 | . Certificate of Status Desired | X \$6 | 8.75 Adee Requir | lditional ed_ | |
| | 6. Name and Address of Currer | t Registered | Agent | | | 7. | . Name and Address of New Re | gistered Ag | ent | | |
| | YTON CIR | | • • • • • • • • • • • • • • • • • • • | | | Name Street Address (P.O. Box Number is Not Acceptable) | | | | | |
| DELTONA | FL 32725 | | | | City | | | FL | Zip Cod | de | |
| | named entity submits this statement roos of registered agent. Signature, typed or printed name of registered age | Rail | O. Fe | Man | 1 | Pre | esident o | da. I am fan | niliar with | , and accept | |
| After | ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 c Payable to Florida Department | | | | • | | Election Campaign Fina Trust Fund Contribution. | ncing | | 00 May Be ed to Fees | |
| 10. | OFFICERS AN | D DIRECTOR | S | 11. | | | ADDITIONS/CHANGES TO OFFIC | ERS AND D | IRECTOF | RS IN 11 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P FERNANDEZ, RAUL 1545 BRAYTON CIR DELTONA FL 32725 | | ☐ Delete | | | | | Ĺ | Change | ☐ Addijidn | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP FERNANDEZ, AWILDA 1545 BRAYTON CIR DELTONA FL 32725 | | ☐ Delete | | | | | | Chapge | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Delete | | | | | | _ Change | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | Delete | | | | | [| ☐ Change | ☐ Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Delete | | | | | С | Change | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Delete | | | | 7- | С | _ Change | ☐ Addition | |
| 12. I hereby of indicated | certify that the information supplied wi on this report or supplemental report poration or the receiver or trustee em | is true and ad | ccurate and that n | CITY- | ST-ZIP mption stated i | the sam | e legal effect as if made under oa | th: that Lam | an office | r or director | |