


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2006 8:00 am
Secretary of State

03-17-2006 90119 030 ***150.00

DOCUMENT # P99000008586

1. Entity Name
DRYWALL & INVESTMENT GROUP, INC.



Principal Place of Business
**7210 SW 39 ST.
 MIAMI, FL 33155**

Mailing Address
**7210 SW 39 ST.
 MIAMI, FL 33155**

2. Principal Place of Business
**12901 W. Okeechobee Rd
 Suite, Apt. #, etc. F-5**

3. Mailing Address
**12901 W. Okeechobee Rd
 Suite, Apt. #, etc. F-5**

City & State
Hialeah Gardens, FL

City & State
Hialeah Gardens, FL

Zip Country
33018

40053100



03092006 Chg-P CR2E034 (11/05)

4. FEI Number
65-0700328

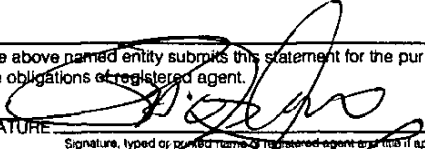
Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**ABILIO, PEDRO DIAZ
 7210 SW 39 ST
 MIAMI, FL 33155**

7. Name and Address of New Registered Agent
 Name **DIAZ, Pedro A.**
 Street Address (P.O. Box Number is Not Acceptable)
12901 W. Okeechobee Rd F-5
 City **Hialeah Gardens** **FL** Zip Code **33018**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE:  DATE: **3/14/06**

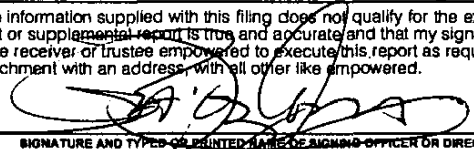
Signature, typed or printed name of registered agent or trustee if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DIAZ, PEDRO ABILIO 7210 SW 39 ST MIAMI, FL 33155 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DIAZ, Pedro A. 12901 W. Okeechobee Rd F-5 Hialeah Gardens, FL. 33018 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS ACOSTA, IDAVIA 7210 SW 39 ST MIAMI, FL 33155 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS Acosta, IDANIA 12901 W. Okeechobee Rd F-5 Hialeah Gardens, FL. 33018 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  DATE: **3/14/06**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR