

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90416 005 ***150.00

DOCUMENT # P99000024465

1. Entity Name
MG DRYWALL SYSTEMS, INC.



Principal Place of Business
15407 W DIXIE HWY
N MIAMI BEACH FL 33162
US

Mailing Address
15407 W DIXIE HWY
N MIAMI BEACH FL 33162
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0903198**

Applied For
Not Applicable

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

☒ **CHECK HERE IF MAKING CHANGES**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GAGNON, CHRISTIAN
15407 W DIXIE HWY
N MIAMI BEACH FL 33162

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 *Christian Gagnon* **CHRISTIAN GAGNON, GEN. MNG.**

2/24/03
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **S** ☐ Delete
NAME **GAGNON, LUC**
STREET ADDRESS **2250 LEON HARNEL STE 200**
CITY-ST-ZIP **QUEBEC, PQ, CANADA G1N- 4L2**

TITLE ☒ Change ☐ Addition
NAME **2250 LEON HARNEL, STE 200**
STREET ADDRESS
CITY-ST-ZIP

TITLE **P** ☐ Delete
NAME **GAGNON, MICHEL**
STREET ADDRESS **2250 LEON HARNEL STE 200**
CITY-ST-ZIP **QUEBEC, PQ, CANADA G1N- 4L2**

TITLE ☒ Change ☐ Addition
NAME **2250 LEON HARNEL, STE 200**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **DIRECTOR**
STREET ADDRESS **GAGNON, LOUIS**
CITY-ST-ZIP **2250 LEON HARNEL, STE 200**
QUEBEC, PQ, CANADA, G1N 4L2

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **DIRECTOR**
STREET ADDRESS **BOURBEAU, PAUL**
CITY-ST-ZIP **683, RUE GIFFARD, STE 204**
LONGUEUIL, PQ, CANADA, J4G 1Y3

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **DIRECTOR**
STREET ADDRESS **CROTEAU, GUY**
CITY-ST-ZIP **15407 WEST DIXIE HWY**
NORTH MIAMI BEACH, FL, 33162

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **DIRECTOR**
STREET ADDRESS **GAGNON, CHRISTIAN**
CITY-ST-ZIP **15407 WEST DIXIE HWY,**
NORTH MIAMI BEACH, FL, 33162

12. 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 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: *Christian Gagnon* **CHRISTIAN GAGNON**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/24/03 **(305) 944-7107**
Date Daytime Phone #

CR2E034 (10/02)