FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham Secretary of State DIVISION OF CORPORATIONS

1996

	MENT # \$104 DIE ACOUSTICS & DRYWA		(0)				II 3610 1 1811 1111		
Principal Place of Business Maling Address ROUTE 3. BOX 714K ROUTE 3. BOX 714K			ık				i Bibil Dibil Di	011 01011 01011 FBQ1	
HAVANA F	L 32333-9803	HAVA	NA FL 32333-	9803					
						3. Date incorporated or Qualifie 11/02/1990	d 3a. Dat	te of Last Re 04/25/1	
2. Principal Pla :1	ce of Businoss	2a. Mailing 26) Address			4. FEI Number 59-3035590			Applied For Not Applicable
Suite, Apt. 4	Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional	
2 City & State		27 City &	State						Required
3		28]				Election Campaign Financing Trust Fund Contribution			O May Be d to Fees
Z(p)	Country 25	Zip 29		Countr 30	у	8. This corporation has liability the Florida Statutes		tax under s	199,032,
	9. Name and Address of Curre	ent Registered A	gent	61	J .,	10. Name and Address of Nev	v Registered	Agent	
PEDDI	E, BOBBY N.								
RT. 3, BOX 714K				82		ress (P.O. Box Number is Not Accep	table)		
HAVAH	NA FL 32333			83	3				
				84	City		FL	85 Zig	Code
			ionos Statutes	S.		ration submits this statement for the rd of directors. I hereby accept the a	• •		=
12.	Synatore, typed or point them of registered age OFFICERS AT	or are too d'applicable. ND DIRECTORS	(NC	OTE: Registered Apo	ant signature require		DATE OFFICERS AN	D DIRECTO	RS IN 12
IZ. ITLE IAME THEF ADDRESS	OFFICERS AT P PEDDIE, BOBBY N RT. 3, BOX 714K	or are too d'applicable. ND DIRECTORS		13. 1.1 TITLE	ant signature require	d when reinstating)	DATE OFFICERS AN	- 	
2. ILE AME THEFT ADDRESS ITY - ST- 7IP	OFFICERS AT P PEDDIE, BOBBY N RT. 3, BOX 714K HAVANA FL	or arcatico d'applicable. ND DIRECTORS	DELETE	13. 1. 1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY	ont signature require T ADDRESS ST-ZIP	d when reinstating)	DATE	D DIRECTO	RS IN 12
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cer by 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.

SIGNATURE: Bioling Me les