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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S26306

· (8)

W.M. DRYWALL INC.

Principal Place of Business Mailing Address					1 100 110 110 Half and 1 No.	Mini Mittel Mittin a	1811 819H 918H 8)1 0 11 1001
4044 NW 19 ST	r	4044 NW 19 ST APT 101G						
APT 101G LAUDERHILL FL	33313	LAUDERHILL FL 33313-7068						
US		US			3. Date Incorporated or Qualific		te of Last Re	port
					01/18/1991	04/	25/1996	
2. Principal Pla	ace of Business	2a. Mailing Address		2	4. FEI Number		——————————————————————————————————————	olied For
21 850	3 NW 5771PG	ACE 26 9503 NW S	57/h1	LACK	65-0243271			1 Applicable
Suite, Apt 3	#, etc. -	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 A Fee Rei	
City & State			City & State				\$5.00	
	MARAC, FL	1				' 🗆	Added to	•
Zip	Country	Zip	Country		8. This corporation has liability	for intangible	tax under s.	199.032,
Z4 333	2) 25 BSA	29 33326	30 U	SA	Florida Statutes	Yes] No	
	9. Name and Address of Cu	rrent Registered Agent		· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New	Registered	Agent	
MOF	RIN, WELLY		81	Name				
4044 NW 19 ST				Street A	Address (P.O. Box Number is Not Acce	otable)		
APT 101G					Land Land Control Cont			
LAU	DERHILL FL 33313		83					
			84	City		P*1	85 Zip C	Öode
				<u> </u>		FL	<u>. </u>	
l office our	ea stored abent, or both, in the S	State of Florida. Such change was au	uthorized bi	v the corp	corporation submits this statement for to poration's board of directors. I hereby a	ne purpose o scept the app	i changing its pointment as	s registered registered
agent La	m familiar with, and accept the c	bligations of, Section 607.0505, Flor	rida Statute	s.	•			
SIGNATURE .						DATE		
12.	Signature, typed or printed name of register OF CIPE DS	S AND DIRECTORS	13.	ent signature	required when reinstating) ADDITIONS/CHANGES TO O		DIRECTOR	S IN 12
THE	PD	DELETE	11 TITLE		DN		Change	Addition
NAME	MORIN, WELLY		1 2 NAME	ļ	· · · · · · · · · · · · · · · · · · ·		· ` `	
STREET ADDRESS	4044 NW 19 101G		1.3 STREE	T ADDRESS	4ch 2 NW 57/4	PLAC	ينيخ ا	
City St-ZiP	LAUDERHILL FL		1.4 CITY-		TAMARAC, FL	333	01	
TITLE	SD	DELETE	2.1 TITLE		CN		Change	Addition
NAME	ROUILLIER, DENISE		2.2 NAME	-	ROUILLIER, DENI	ડ્રહ્	_	
STREET ADDRESS	4044 NW 19 101G		2.3 STREE	I ADDRESS	ROUILLIER, DENI	PLAC	E	
CHY-S1-70P	LAUDERHILL FL		2. 4 CiTY-		TAMARAC, FL	333	21	
' 115		☐ DELÉTE	3.1 T(TLE				Change	Addition
NAME:			3.2 NAME					
STREET ADDRESS			3.3 STREE	T ADDRESS				
CiTY-ST-ZiP			3.4. CITY-	ST-ZIP				Augus -
TIPLE		☐ DELETE	4.1 TITLE				L Change	Addition
NAME			4. 2 NAME					
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP		DELETE	4.4 C(TY-	ST-ZIP			Change	Addition
TIILE		ריין טנרגונ	5 1 TITLE				- onange	, (QG/(Q))
NAME			5.2 NAME	T ADDRESS				
STHEET ADDRESS			5.4 CITY-					
THUE		DELETE	5.4 CHY-	31-21°			Change	Addition
			6.2 NAME				•	
NAME CTULLE ATHRECO				T ADDRESS				
STREET ADDRESS			6.4 CITY-					
14. I do here	 by certify that the information su 	pplied with this filing does not qualif	v for the ex	emption s	stated in Section 119,07(3)(i), Florida St	tutes. I furthe	er certify that	the
informatio	on indicated on this annual report officer or director of the comparati	rt or supplemental annual report is tr on or the receiver or trustee emoow	rue and acc ered to exe	nicate and	that my signature shall have the same report as required by Chapter 607, Flor	legal ettect a	is it made un	ider oain: inai
appears	in Block 12 or Blogh 13 if chang	ed, or on an attack nent with an add	lyess.					
1	. / 1	// / / / /	<i>r</i> .					

SIGNATURE:

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 3-10-9

954-722-4554 Davine Phone #

FILED

Mar 11 1997 8:00am

Secretary of State

A PROTECTION OF THE PROPERTY O