## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

Page 10/2,

	ANNOAL	REPORT		_
DOČUMENT # V52459  1. Entity Name MASTERLY DRYWALL CORPORATION			FILED	
				07 JUNL-3 PM 1:53
Principal Place 1800 W 49 5 334	_	Mailing Address 15096 SW 104 STREET #101	on sou. I	SECRETARY OF STATE  37ENFALLAHASSEE, FLORIDA
HIALEAH, FL	33012	MIAMI, FL 33196 # 8	101 11 FL 33196	
DO NOT WRITE IN THIS SPAC			CE	06192007 No Chg-P CR2E034 (11/05)  4. FEI Number Applied For
				65-0347826 Not Applicable  5. Certificate of Status Desired \$8.75 Additional Fee Required
DE LA TORRE, JULIAN B Chauge of Culture State of Culture				DO NOT WRITE IN THIS SPACE
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  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE				
Ogradios, 1920 of printed name or objection again, and their applicable. (NOTE, negociator Again agriculta required when reinstaining)				
FILE NOWIII FEE IS \$550.00  Due by September 14, 2007  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.   Added to Fees				
10.	OFFICERS AND DI	market a la VIXII/40		
TITLE NAME	DE LA TORRE, JULIAN B	077 5.0.103 17	u	
STREET ADDRESS CITY-ST-ZIP		ni CL 33196		
TITLE NAME	/			900106256809
STREET ADDRESS CITY-ST-ZIP	1			07/17/07-01012-010 **150.00
TITLE NAME				•
STREET ADORESS CITY-ST-ZIP			<b>1</b>	DO NOT WRITE
TITLE NAME				IN THIS SPACE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	B 1/3/17			
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 it 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: Onlike of last of the second of t				
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dayline Proce #				

6/27/07 e2str

To: Whom it may Coursen

Let this serve as notice that

O did not receive any notice

or Post card for the year 2007

Corporate renewal for masterly

Orywall Postation. Dossisee

Gwould like for tablate fee

to be waited. This would

be greatly appreciate it.

Sincerely

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