

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Sep 10, 2003 8:00 am**  
**Secretary of State**

09-10-2003 90059 027 \*\*\*150.00

DOCUMENT # **P01000107602**

1. Entity Name

**Adonai Roofing, inc.**



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

**8878 W. Flagler ST**

3. Mailing Address

**8878 W. Flagler ST.**

Suite, Apt. #, etc.

**#1**

Suite, Apt. #, etc.

**#1**

DO NOT WRITE IN THIS SPACE

City & State

**Miami,**

City & State

**Miami,**

4. FEI Number

**05-1151831**

Applied For

Not Applicable

Zip

**FL**

Country

**33174**

Zip

**FL**

Country

**33174**

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

7. Name and Address of Current Registered Agent

Name

**Clara T. Garcia**

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

**8878 W. Flagler ST #1**

City

**Miami,**

FL

Zip Code

**33174**

**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 fee, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**09/02/03**

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution

**\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Clara T. Garcia  
8878 W. Flagler ST #1  
Miami, FL 33174**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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IN THIS SPACE**

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 on an attachment with an address, with all other officers empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DATE AND PHONE #

**09/02/03**

**(305) 263 8085**

CR2E034B (12/02)

Attachment

80146124

Adonai Design Construction, Inc.

8878 W. Flagler Street # 1

Miami, FL 33174

# PO 1000107602

August 14, 2003

Florida Department of State  
Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Re: Adonai Design construction, Inc. #65-1151831

Adonai Roofing, Inc. #65-0885532

2003 Uniform Business Report

Gentlemen:

This letter is to inform you our address has changed. Also be informed that Business Report Forms for the year 2003 for the above mentioned corporations were never received in our office.

Following our telephone conversation, we have enclosed check # 1131 & # 1132, both in the amount of \$150 to be applied as payments for the annual corporate fee for the above mention corporations.

We ask you to credit this checks accordingly and to abate the late fee.

We apologized for the inconvenience and thank you in advance for your cooperation.

Respectfully,

Clara Garcia  
President

Enclosure:

Ck # 1131 \$150.00

Ck # 1132 \$150.00