2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000112964

Entity Name: J.T. ROOFING & MAINTENANCE INC.

FILED Apr 08, 2002 8:00 AM Secretary of State

Current Principal Place of Business:		New Principal Place of Business:		
	DARHURST R O, FL 32820	RD		
Current Mailing Address:		New Mailing Address:		
	DARHURST R O, FL 32820	RD		
FEI Number	r: 03-0374896	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of (Current Registered Agent:	Name and Address o	f New Registered Agent:
18202 CE	TON, TRACY DARHURST F O, FL 32820	RD		
		submits this statement for the	ourpose of changing its registere	d office or registered agent, or both
in the Stat	e of Florida.	· · · · · · · · · · · · · · · · · · ·	ourpood of ortainging the registers	d office of registered agent, or both,
in the Stat SIGNATU				d office of registered agent, of both,
	RE:	nic Signature of Registered Ag		Date
SIGNATU	RE: Electro	nic Signature of Registered Agoo satisfy its Intangible Tax filing rec	ent	
SIGNATU This corpor Election Ca	RE: Electro	nic Signature of Registered Ago o satisfy its Intangible Tax filing red g Trust Fund Contribution ().	ent quirement and elects to do so (X).	
SIGNATU This corpor Election Ca	RE: Electro ration is eligible t impaign Financin	nic Signature of Registered Ago o satisfy its Intangible Tax filing rec og Trust Fund Contribution (). CTORS:) Delete , TRACY HURST RD	ent quirement and elects to do so (X).	Date
SIGNATU This corpor Election Ca OFFICER Title: Name: Address:	Electro ration is eligible to impaign Financin ES AND DIRECT PSTD (PENNINGTON, 18202 CEDAR ORLANDO, FL	nic Signature of Registered Agrossatisfy its Intangible Tax filing red in growth of the state of	ent quirement and elects to do so (X). ADDITIONS/CHANGI Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NATHAN GOULD PD 04/08/2002