2007 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Apr 30, 2007 8:00 am Secretary of State DOCUMENT # P02000006407 04-30-2007 90458 004 ***150.00 ALELUYA-ROOFING COMPANY Principal Place of Business Mailing Address 4100047 3661 NW 48 TERRACE **3661 NW 48 TERRACE** MIAMI, FL 33142 MIAMI, FL 33142 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc. CR2E034 (12/06) 03162007 Chq-P Applied For City & State City & State 4. FEI Number Not Applicable 30-0028353 Ζıρ Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) Successful NVV 48 m + ervace SANTANA, JULIO A 5911 S.W. 5TH ST. MIAMI, FL 33144 MIANI 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. Lam familiar with, and accept the obligations of registered agent SIGNATURE Signature: typicis or pretentir ame of registered acentiaco title il applicable DATE (NOTE Registered Agent signature required when reinstabling) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIPECTORS IN 11 PD Delete TITLE TITLE Change Addition Santana, Julio A SANTANA, JULIO A NAME NAME 3641 NW 48th terrace STREET ADDRESS 5911 S.W. 5TH ST. STREET ADDRESS MIAMI, FL 33144 CITY-ST-ZIP CITY-ST-ZIP Miami Fl. 33142 Delete Rodriguez Alberto JR THILE VĐ M Change Addition RODRIGUEZ, ALBERTO JR NAME NAME 3661 NN 48th terrace STREET ADDRESS 5911 S.W. 5TH ST. STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33144 CITY-ST-ZIP MIAMI, FL 33142 111116 ☐ Delete TITLE Change Addition HAME NAME STREET ADDRESS STREET ADDRESS CITY 5T-2/P CITY-ST-ZIP THILE ☐ Delete TITLE ☐ Change Addition MAME NAME STREET ADDRESS STREET ADDRESS CITY ST-ZIP CITY-ST-ZIE ☐ Delete THILE TITLE Change Addition HAME STREET ADDRESS STREET ADDRESS CIPY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TILLE NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filling 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 if made under oath, that I am an officer or director of the corporation or the receiver or true and accurate this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or the receiver or trust changed, of on an attachment with an a s, with all other b empowered.

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Daytone Pirrore #

Date