

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000082384

FILED  
Apr 21, 2008  
Secretary of State

Entity Name: STATE WIDE ROOFING SERVICE INCORPORATED

**Current Principal Place of Business:**

1817 NW 21ST STREET  
POMPANO BEACH, FL 33069 US

**New Principal Place of Business:**

**Current Mailing Address:**

1817 NW 21ST STREET  
POMPANO BEACH, FL 33069 US

**New Mailing Address:**

FEI Number: 65-0533807      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BALTAR, LEVINDO E  
1574 SW 21ST LN  
BOCA RATON, FL 33486 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSD ( ) Delete  
Name: BALTAR, LEVINDO E  
Address: 1817 NW 21ST STREET  
City-St-Zip: POMPANO BEACH, FL 33069 US

Title: VD ( ) Delete  
Name: BALTAR, LIZANEAS P  
Address: 22320 SW 57TH CIRCLE  
City-St-Zip: BOCA RATON, FL 33428

Title: TD (X) Delete  
Name: FERNANDES, CLAUDIO  
Address: 9089 SW 1ST ST.  
City-St-Zip: BOCA RATON, FL 33428

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TD (X) Change ( ) Addition  
Name: FERNANDES, CLAUDIO  
Address: 9089 SW 1ST ST.  
City-St-Zip: BOCA RATON, FL 33428

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: LEVINDO BALTAR

P

04/21/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date