

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000008028 (9)

1. Corporation Name  
**WIZARD ROOFING, INC.**



Principal Place of Business: 7425 NW 4 ST PLANTATION FL 33317  
Mailing Address: 7425 NW 4 ST PLANTATION FL 33317

3. Date Incorporated or Qualified: 01/31/1995  
3a. Date of Last Report

2. Principal Place of Business: 21 1843 S W 31st AVENUE  
2a. Mailing Address: 26 1843 S W 31st AVENUE

4. FEI Number: #65-0552127  
Applied For: Not Applicable

22. City & State: 27  
23. PEMBROKE PARK, FLORIDA 28 PEMBROKE PARK, FL

5. Certificate of Status Desired:  \$8.75 Additional Fee Required

24. 33009 25. USA 29. 33009 30. USA

6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s 199.032, Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent  
DIVETO, CHARLES M JR  
7425 NW 4 ST  
PLANTATION FL 33317

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	PRES.
NAME	DIVETO, CHARLES M JR	1.2 NAME	RITA HERRON
STREET ADDRESS	7425 NW 4 ST	1.3 STREET ADDRESS	2130 NW 93 AVENUE
CITY-ST-ZIP	PLANTATION FL 33317	1.4 CITY-ST-ZIP	PEMBROKE PINES, FL 33026
TITLE		2.1 TITLE	V. PRES.
NAME		2.2 NAME	JAMES A. SHUSTER, JR.
STREET ADDRESS		2.3 STREET ADDRESS	2310 WALNUT COURT
CITY-ST-ZIP		2.4 CITY-ST-ZIP	PEMBROKE PINES, FL 33026
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE: *Rita Herron* Rita Herron 4-26-96 954-967-8030  
Date Daytime Phone #

CR2E034 (12/95)