FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000044813

1. Corporation Name

1 CALL ROOFING, CORP.

Principal	Piace	of	Business
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Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90230 001 ***150.00



Principal Place	of Business	Mailing Address				I (BAIIDA) ((B SBIII (BBIS BAI)) BA	111 MM111 AM111 M					
2411 NW 11TH ST #12 2411 NW 11TH ST #12												
MIAMI FL 33125 MIAMI FL 33125				DO NOT WRITE IN THIS SPA		SPACE	ACE					
						3. Date incorporated or Qualifed						
						05/19/1997			_			
2. Principal Pi	ace of Business	2a. Mailing Address				4. FEI Number	,		Applie	ed For		
21		26				65-0757719		<u>: </u>		pplicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	,		**	5. Certificate of Status Desired		\$8.7 Fee	5 Add Requ			
City & State City & State					6. Election Campaign Financing			00 Ma	*			
23	3 28					Trust Fund Contribution		Adde	ed to F	ees		
Zip	Country	⊢	Zip Cour			8. This corporation owes the current year Intangible Personal Property Tax ☐ Yes ☐ N			lNIa			
24	25		30			Personal Property Tax.		Yes		NO		
	9. Name and Address of Currer	nt Registered Agent		81	Name	10. Name and Address of New F	registerea /	Agent.				
TOD	DEC OCCAD			"	Name							
TORRES, OSCAR 2411 NW 11TH ST #12				82	Street Addre	Street Address (P.O. Box Number is Not Acceptable)						
	Al FL 33125			83	_							
IAIIV	MI FE 33123			03			_		_			
	•			84	City		FL	1	Zip Coo			
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										}		
	Signature, typed or printed name of registered age			Agent	signature required		DATE EICEDS AN	D DIBEC	CTORS	E IN 12		
12.		ND DIRECTORS DELETE	13.	TI E		ADDITIONS/CHANGES TO OF	FICERS AIN	☐ Chan		Addition		
TITLE	DP -		1.1 11		1							
NAME	TORRES, OSCAR				4000000					1		
STREET ADDRESS	2411 NW 11TH ST #12				ADDRESS							
CITY-ST-ZIP	MIAMI FL 33125	☐ DELETE	2.1 TI	TY-\$T-	- ZiP			☐ Chan	noe	Addition		
TITLE	DST CAPMEN		2.1 N						-	_		
NAME	TORRES, CARMEN		1		ADODECC					{		
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TITLE			3.2 N/			• • • • • • • • • • • • • • • • • • • •			•	~		
NAME				_	ADDRESS					-		
STREET ADDRESS				TY-ST								
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TI		1- <u>2</u> F			☐ Chan	nge	Addition		
NAME		_	4. 2 N							-		
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STREET ADDRESS				TY-ST								
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NAME			5.2 N							j		
			5.3 S	TREET.	ADDRESS							
STREET ADDRESS	,			ITY-ST-						ł		
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TI					☐ Chan	nge	Addition		
			6.2 N							}		
NAME					ADDRESS					[
STREET ADDRESS	· \		1.00							ţ		

14. 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 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 of 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 of the attachment with an address, with all other like empowered.

SIGNATURE: