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 # 203947 1. Corporation Name

R & J ROOFING INC

R & J HOOFING INC										
Principal Place of Business		Mailing Address	3				* · • • · · · · · · · · · · · · · · · ·	-		
4850 S.W. 58TH AVENUE		4850 S.W. 58TH AVENUE FT LAUDERDALE FL 33314				ļ				
FT LAUDERDALE FL 33314							DO NOT WRITE IN THIS SPACE			
						ļ	3. Date Incorporated or Qualifed			1
							07/01/1957			
		2a. Mailing Add	Iress			-†	4. FEI Number		-نسلا	ied For
2. Principal Place of Business		26					<u>59-0815539</u>			Applicable
Suite, Apt. #; etc.		Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.75 Ad Fee Req	uired
22		27							\$5.00 N	
City & State		City & State				1	6. Election Campaign Financing		Added to	
23		28 Country				Trust Fund Contribution Added to Fees 8. This corporation owes the current year Intangible				
Zip	Country	Zip	[Country			Personal Property Tax.		∐ Yes _i	No
24 25		29	30	<u> </u>			10. Name and Address of New	Registered A	Agent	
9. Name and	d Address of Current R	registered Ageni	<u> </u>	81	Name	_				}
LAMB, RICHARD E			<u> </u>		Iress (P.O. Box Number is Not Acceptable)					
4216 JEFFERSON			82	Street	Address	S (F.O. DOX NUMBER IS NOT NOOP				
HOLLYWOOD FL 33021				83						
HOLLINOODILL	·			ļ <u>.</u>	022				85 Zip C	ode
				84	City			FL	. 1	- sistered
agent. I am familiar with,	s of Sections 607.0502 a , or both, in the State of and accept the obligatio	ns of, Section 60	7.0505, Florida	Statutes	5.		ation submits this statement for the sound of directors. I hereby according to the statement of the sound of directors. I hereby according to the statement of	DATE		
Signature, typed or p	orinted name of registered agent a OFFICERS AND	DIRECTORS	,	13.			ADDITIONS/CHANGES TO O	FFICERS AN	ID DIRECTO	RS IN 12
12. P	0111021101110		DELETE	1.1 TITLE		1			C Olanda	ا ۱۰۰۰۰۰۰۰۱
LAMB DICK	IARD B., SR.			1.2 NAME				سام		
NAME LAMB, RICH		•		1.3 STREE	ET ADDRESS	\$				}
CITY-ST-ZIP HOLLYWOO				1.4 CITY-	ST-ZIP_	↓			☐ Change	Addition
TITLE VP			DELETE	2.1 TITLE				•		_
	sit _1	it -00		2.2 NAME		s 4	. ,	~	.	
NAME -LAMB, RICH STREET ADDRESS 4850 SW 5	517.99		2.3 STREET ADDRESS		S					
CITY-ST-ZIP DAVIE FL				2.4 CITY-		-			Change	☐ Addition
TITLE] DELETE	3.1 TITLE		l		*		
NAME				3,2 NAME						Ì
STREET ADDRESS					ET ADDRESS	~				
CITY-ST-ZIP		_ 	DELETE	3.4. CITY		-			Change	Addition
TITLE		L	_ DCF#+F	4.1 MLE					•	
NAME					ET ADDRES	ss				
STREET ADDRESS				4.3 STRE						F A Line.
CITY-ST-ZIP			DELETE	5.1 TITLE					☐ Change	Addition
mre .		·		5.2 NAM		ļ		*		
NAME				5.3 STR	EET ADDRES	\$S				
STREET ADDRESS					-ST-ZIP				F1.64	☐ Addition
CITY-ST-ZIP : '			DELETE	6.1 TITL	Ē	"			Change	☐ Addition
TITLE .				6.2 NAM	E					
NAME				6.3 STR	EET ADDRES	ss				
STREET ADDRESS				6.4 CITY	-ST-ZIP]				luf-manifer

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 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, with all other like empowered.

SIGNATURE:

Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90031 046 ***150.00