2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

Mar 21, 2005 8:00 am Secretary of State 03-21-2005 90104 002 ***150.00 **DOCUMENT # 344355** 1. Entity Name WEATHERTROL MAINTENANCE CORP Principal Place of Business Mailing Address 7250 NE 4 AVE 50028699 7250 NE 4 AVE MIAMI, FL 33138 US MIAMI, FL 33138 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03142005 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 59-1262109 Not Applicable Zip Country 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 BORJA, ISIDRO Street Address (P.O. Box Number is Not Acceptable) 7250 NE 4 AVE MIAMI, FL 33138 Zip Code FL 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. I am familiar with, and accept the obligations of registered agent. . Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PO TITLE □ Delete TITLE ☐ Change Addition BORJA, ISIDRO NAME NAME 7250 NE 4 AVE STREET ADDRESS STREET ADDRESS ÇITY-ST-ZIP CITY-ST-ZIP MIAMI, FL SD ☐ Delete TITLE Change Addition NAME BORJA, CARLOS NAME BORJA, CARLOS STREET ADDRESS 5735 SW 54 TERR STREET ADDRESS 8245 S.W. 93rd Street MIAMI, FL 33155 CITY+ST-7IP CITY-ST-ZIP MIAMI, FL 33156 VTR ☐ Delete TITLE VTR TX Change TITLE ☐ Addition BORJA, VIVIAN NAME NAME MARTENS, VIVIAN 10440 NW 19 PL STREET ADDRESS STREET ADDRESS 13551 N.W. 6th Street # 204 PEMBROKE PINES, FL 33028 PEMBROKE PINES, FL 33026 CITY-ST-ZIP CITY-ST-ZIE Delete Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7iP CITY-ST-ZIP ☐ Delete TITLE Addition TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CFTY-ST-ZIP 12. 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 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 trostee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an apidress, with all other like empowered.

Isidro Borja

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

305-908-1000