SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #
1. Corporation Name

(0)

WACO ROAT SALES INC

FILED Jul 29 1997 8:00am Secretary of State

WAGO !	DONI UNECO INO								
Principal Place of Business Mailing Address					·				
			UDENS ROAD			1			
MIAMI FL 331	MIAMI FL 33133								
						DO NOT WRITE			 ,
						3. Date Incorporated or Qualified		ite of Last R	· .
9 Principal P	tace of Business	2a. Mailing Address				10/28/1969 4. FEI Number	<u> </u>	<u>/01/1996</u>	oplied For
2. Principal Place of Business 2a. Mailing Address 26						59-1274814		— —	ot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc								\$8.75	
22						5. Certificate of Status Desired			equired
City & State	е	City & State			6. Election Campaign Financing		\$5.00	May Be	
28 28						Trust Fund Contribution			to Fees
l Zip				ntry		8. This corporation owes or has paid the current year Intangible			
24	252930					Personal Property Tax due June 30. 📈 Yes 🔲 No			
9, Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent 81 Name									
OOLE, WALLAGE II., JR.					Name				
3501 ST. GAUDENS RD. MIAMI FL 33133				82 Street Address (P.O. Box Number is Not Acceptable)					
MIVMI FL 33133			ŀ	83				· · · · ·	
				64	City		FL	85 Zip	Code
11. Pursuant i	to the provisions of Sections 607.050	2 and 607,1508. Florida Statu	tes, the at	ove	-named corpo	oration submits this statement for the c		changing it	ts registered
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 obtigations of, Section 607,0505. Florida Statutes.									
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
12.	OFFICERS AN		13.			ADDITIONS/CHANGES TO OFFIC	CERS AND	DIRECTOR	RS IN 12
TITLE	PD	DELETÉ	1.1 1 1	LE				Change	☐ Addition
NAME	COLE, WALLACE H., JR.		1.2 NA	1.2 NAME					
STREET ADDRESS	3501 ST. GAUDENS ROAD				ADDRESS				İ
CITY-ST-ZIP	Miami Fl. VD	DELETE	1.4 CI		T-ZIP			T Change	Addison
TITLE	COLE, WALLACE H III	L' DETEIL	2.1 TIT					☐ Change	Addition
NAME Street address	6545 SW 131ST ST		2.2 NA		ADDRESS	•			
CITY-ST-ZIP	MIAMI FL		2. 4 CI						
TITLE		DELETE	3.1 10		1) - Lir			Change	☐ Addition
NAME			3.2 NA	ME					
STREET ADDRESS			3.3 STREET		ADDRESS				
CITY-ST-ZIP			3.4. CITY-						
TITLE		DELETE	4.1 Til	ILE				Change	Addition
NAME		0	4. 2 NAME						İ
STREET ADDRESS			4.3 STREE		ADDRESS				
CITY-ST-ZIP			4.4 CITY - 5		r-ZIP			r -	
TITLE		☐ DELETE	5.1 TIT					Change	☐ Addition
NAME			5.2 NAME						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		☐ DELETE	5.4 CI		r-zip			Change	Addition
TITLE		₽ ottele	6.1 TIT					— ∧uanye	
STREET ADDRESS			6.2 NA		ADDRESS				
CITY-ST-ZIP			6.4 CI						ļ
	by certify that the information supplied	d with this filing does not qua				in Section 119.07(3)(i), Florida Statute	s. 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 eath; 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 il changed, or on an atlantment with an address.