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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

	MENT # 473418 DAST ROOFERS SUPPLY, IN	• •				J. 81811 81811 81811 61811 61811
Principal Plac	e of Business	Mading Address			1 100111 01911 16506 75111 21087 11961 7511 61611 010	A BABAL OVERS BABAL DADAL IDDA
8430 TERMINAL DRIVE SOUTH 8T. PETERSBURG FL 33712 US		PO BOX 12587 ST. PETERSBURG FL 33733 US		DO NOT WRITE IN THIS	SPACE	
					3. Date Incorporated or Qualified	,
9 Principal P	lace of Business	2a. Mailing Address			04/02/1975 4. FEI Number	Applied For
<u>য়</u>		26			59-1583243	Not Applicable
Suite, Apt. #, otc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
22		27			5. Certificate of Status Desired	Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	Z _{ID}	Country		Trust Fund Contribution	Added to Fees
24	25	29	30		 This corporation owes or has paid the cu Personal Property Tax due June 30. 	rrent year Intangible ☐ No
5-1	g, Name and Address of Current		1301		10. Name and Address of New Registered	
GREGORY, ROWLAND E J 7498 WATERSILK DR. PINELLAS PARK FL 34666				City	tress (P.O. Box Number is Not Acceptable)	
SIGNATURE	Signature typed or protect name of registered ager	of acceptate it applier able (NC	III. Registered Agent		poration submits this statement for the purpose of the purpose of the portion's board of directors. I hereby accept the appropriate of the purpose of the pu	
12.	OFFICERS AND	DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
MAME	GREGORY, ROWLAND E. JR.	C pecere	1.2 NAME			E cuande El vocition
STREET ADDRESS	7498 WATERSILK DR.		1.3 STREET ADDRESS			
CITY-ST-ZIP	PINELLAS PARK FL		1.4 CITY-ST-ZIP			į :
TITLE	TS	☐ DELETE	21 TITLE			☐ Change ☐ Addition
HAME	TAMAYO, WILLIAM		22 NAME			J
STREET ADDRESS			2 3 STREET A	DORESS		
CITY-ST-ZIP	TAMPA FL		2.4 CITY-ST	- ZIP		
TITLE		DELLETE	3 1 TITLE			Change Addition
NAME			3.2 NAME	nontre		1
STREET ADDRESS			3.3 STREET A			
CITY-ST-ZIP TITLE		DELETE	3.4 CITY-ST 4.1 TITLE	- 2117		Change Addition
NAME			4 2 NAME	}		
STREET ADDRESS			4.3 STREET A	DORESS		
CFTY-ST-ZIP			4 4 CITY - ST-			
YIYLE		☐ DELETE	5.1 THTLE			Change Addition
NAME			5.2 NAME			ì
STREET ADDRESS			5.3 STREET A	DORESS		
CITY-ST-ZIP			5.4 CITY - ST -	ZIP		
TITLE		DELETE	6.1 THE	}		Change Addition
NAME STREET ADDRESS			62 NAME 63 STREET A	DORESS		
PHART I MODULE 20			DOSINCEIA	ount 33		1

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 suppliencertal annual report is true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an officer or director of the corporation or acceiver 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 optimization with an address.

SIGNATURE:

4-29-98

FILED

May 07 1998 8:00am

Secretary of State

813-327 - 7666 Dayanie France 9 0400193