FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 May 08 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (3)682044 ECONOMY ROOF COATING, INC. Principal Place of Business Mailing Address 4500 SW 98 AVE 4500 SW 98 AVE MIAMI FL 33165 MIAMI FL 33165 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/01/1980 4. FEI Number 2. Principal Place of Business 2a. Mailing Address 21 26 59-2020922 Suite, Apt. #. etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible ☐ Yes 24 25 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name STOCKETT, CHARLES A. 4500 SW 98 AVE Street Address (P.O. Box Number is Not Acceptable) **MIAM! FL 33165** вэ City 84 85 Zip Code 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, typed or portind name of registered agent and title if apply able (NOTE Ringistered Agent signature requ ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. TITLE DELETE 1.1 TITLE Change STOCKETT, CHARLES NAME 1.2 NAME 4500 SW 98 AVE STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 14 CITY-ST-ZIP DELETE 2.1 TITLE Change TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY - ST-ZIP DELETE 3.1 TITLE Change TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change 4.2 NAME STREET ADDRESS 4 3 STREET ADORESS CITY-ST-ZIP 4 4 CiTY-ST-ZIP

6.4 CITY-ST-ZIP 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:

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

61 TITLE

6.2 NAME

5.4 CITY - ST-ZIP

6.3 STREET ADDRESS

SIGNATURE: Chulu A State Charles Stockett pres 4/22/98

DELETE

DELETE

TITLE

NAME

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

Addition

Addition

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Addition

Addition

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Change

Change

Applied For

Not Applicable