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

DOCUMENT # F49272

(0)

STROZ ROOFING, INC.

FILED Jan 15 1998 8:00am Secretary of State

Principal Place of Business	Ma⊴ing Address			MIN MANNA MINNA MANNA MINAS PANA
1910 PAMPAS WAY	1310 PAMPAS WAY			
W PALM BCH FL 33414	W PALM BCH FL 33414		DO NOT MOVE 1817	0.000.00
Į US	U\$		DO NOT WHITE IN THI	S SPACE
			3. Date Incorporated or Qualified 10/12/1981	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 Suffer And H ada	26		NOT APPLICABLE	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 City & State	City & State			Fee Required
23	28		6. Flection Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip Country	Zip	Country		Added to Fees
24 25	}	30	 This corporation owes or has paid the of Personal Property Tax due June 30. 	Yes No
9, Name and Address of Cur			10. Name and Address of New Registere	
STROZ, JAMES		81 Name		
1310 PAMPAS WAY		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
W PALM BEACH FL 33414		62 Sileet Add	ress (F.O. Box Number is Not Acceptable)	
		83		
		84 City		
		84 City	F	85 Zip Code
 Pursuant to the provisions of Sections 607.0 office or registered agent, or both, in the St 	0502 and 607 1508, Florida Statute	s, the above-named corp		
agent. I am familiar with, and accept the ob-	ate of Florida. Such change was a digations of, Section 607.0505, Flor	uthorized by the corpora rida Statutes.	tion's board of directors. I hereby accept the ap-	pointment as registered
SIGNATURE	•			
Signature, typed or printed name of registered		Fingisterco Agont signature recpi	red when reinstating) DATE	
	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AT	
	[_] DETETE	1.1 TILLE		Change Addition
HAME STROZ, JAMES S.		1.2 NAME		
STREET ADDRESS 1310 PAMPAS WAY CITY-ST-ZIP WEST PALM BEACH FL		1.3 STREET ADDRESS		
		1.4 CITY-ST-ZIP		
TITLE	☐ DELETE	21111116		Change Addition C
NAME		2.2 NAME		
STREET ADDRESS		2 9 STHEET ADDRESS		
CMY-ST-ZIP TITLE	DELETE	2 4 CITY - ST - ZIP 3 1 TITLE		Charge Little
				☐ Change ☐ Addition
NAME Street address		3.2 NAME 3.3 STREET ADDRESS		
CITY-ST-ZIP	DOCLETE	3.4. CITY - ST - 7IP 4.1 TITLE		Change Addition
NAME	L. Marie	4. 2 NAME		C Ollege C Addition
		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CHY-ST-7IP		
TITLE	DELETE	51180		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY - ST - ZIP		
TITLE	DETE	6.1 1/1/6		Change Addition
NAME		6 2 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 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 supplienced 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.