CR2E034.(11/98)

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State
DIVISION OF CORPORATIONS

## FILED Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90040 039 \*\*\*150.00

DOCUMENT	# 0	<b>=F</b> 20	240
DOCOMENT	π	TOZ:	<b>14</b> 5

1. Corporation Name

J. VALIEI	NTE ROOFING, INC.						
Principal Place	e of Business	Mailing Address			\$ 1801100 stat attis tiata tatti atata tatti etatti	Billi mimit atust a	
1770 N.W. 7TH	STREET	1770 N.W. 7TH STREET					
MIAMI FL 33125	•	MIAMI FL 33125			DO NOT WRITE IN THIS	S SDACE	
	•				3. Date Incorporated or Qualifed	JOFACE	
					11/06/1981		
2. Principal Pl	lace of Business	2a. Mailing Address		•	4. FEI Number	Ap	plied For
21		26			59-2141728	No	t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				_	\$8.75	Additional	
22]				5. Certificate of Status Desired	Fee Re	quired	
City & State	8	- City & State		-	6, Election Campaign Financing	\$5.00	May Be
23	-	28			Trust Fund Contribution	Added t	
Zip	Country	Zip	Country	,	8. This corporation owes the current year fr	ıtangible	
24	25	29 30	ה <sup>י</sup>		Personal Property Tax.	Ŭ Yes	□No
	9. Name and Address of Current		т		10. Name and Address of New Registered	Agent	
			81	Name			
VALIENTE, JULIAN C. 4000 S.W. 5TH TERR. MIAMI FL 33134			Other ed. A.d.	(5 0 B ) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
		82	Street Address (P.O. Box Number is Not Acceptable)				
		83					
			L			<del></del>	
	·		84	1	FI	_   `   `	Code
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligations.	if Florida. Such change was auth	onzed by	the corporat	poration submits this statement for the purpose of tion's board of directors. I hereby accept the appo	f changing its pintment as re	registered egistered
SIGNATURE	dolian E. la	liente			3/16/9	<i>79</i>	
	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re		nt signature requi	red when reinstating) J DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS A	Change	Addition
TITLE	PD	☐ DELETE	1.1 TITLE				
NAME	VALIENTE, JULIAN C.		1.2 NAME				
STREET ADDRESS	4000 SW 5TH TERR.		1.3 STREE	TADDRESS			
CITY-ST-ZIP	MIAMI FL		1.4 CITY-5	T-ZIP			
TITLE		☐ DELETE	2.1 TITLE			Change	☐ Addition
NAME	·		2.2 NAME				
STREET ADDRESS			2.3 STREE	TADDRESS			
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP			
TITLE		DELETE	3.1 TITLE	-		□ Change	☐ Addition
NAME :			3.2 NAME				
STREET ADDRESS			3.3 STREE	TADDRESS			
OTT OT 7ID			34 CITY		•		

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, with all other like empowered.

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

TILE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

☐ DELETE

☐ DELETE

Date

Daytime Phone #

Change

Change

\_\_\_ Change

Addition

Addition

☐ Addition