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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

(4)

FILED Feb 23 1998 8:00am Secretary of State

B & R ROOFING & SHEET METAL, INC.							
Principal Plac	e of Business	Mailing Address			-	DERFE DIRFE EURIE DID	
650 CYPRESS ST 650 CYPRESS ST							
MERRITT ISLAND FL 32952 MERRITT ISLAND FL 32952			2	DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified	THIS SPACE	
					12/30/1981	•	
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number	1	Applied For
21		26			59-2147491		Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			-			\$8.7	5 Additional
22 27				a. Certificate of Status Desired	Fee	Required	
	City & State City & State				6. Election Campaign Financing		00 May Be
Zip	Country Zip Co		Country				ed to Fees
24	25	29 3			This corporation owes or has paid to Personal Property Tax due June 30		Intangible
241	g. Name and Address of Curren		91		10. Name and Address of New Regis		
ST	OUT, ROBERT H		81 Nar	ne			
650 CYPRESS ST				ot Addro	ss (P.O. Box Number is Not Acceptable)		
MERRITT ISLAND, FL			82 Stre	el Audies	ss (F.O. Box Number is Not Acceptable)		
1	952		83				
			84 City	 		85 Z	ip Code
						FL T	
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							
12.	Signature, typed or printed name of registered ager OFFICERS AND		Registered Agent signa	llure required	when reinstating) ADDITIONS/CHANGES TO OFFICER	DATE	ODS IN 12
TITLE	D	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICER	Chang	
NAME	COOK, ROBERTA S	_	1.2 NAME				
STREET ADDRESS	420 ROBERTSVILLE RD.		1.3 STREET ADDRE	SS			
CITY-ST-ZIP	OAK RIDGE TN		1.4 CITY-ST-ZIP				
TITLE	SDV	☐ DELETE	2.1 TITLE			☐ Chang	je 🔲 Addition
NAME	Stout, Sara D		2.2 NAME				
STREET ADDRESS	+ 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		2.3 STREET ADDRES	is	•	4	İ
CITY+ST-ZIP			2.4 CITY-ST-ZIP				
TITLE	PD COURT DODEDT II	☐ DELETE	3.1 TITLE			L. Chang	e 🔲 Addition
NAME	STOUT, ROBERT H 285 MARLIN DR		3.2 NAME	_			Ī
STREET ADDRESS	AFERRITA IN AND EL ANGO		3.3 STREET ADDRES	SS			İ
CITY-ST-ZIP TITLE	MENNIT ISLAID, FL 0000	DELETE	3.4. CITY - ST - ZIP 4.1 TITLE	+		Chang	e Addition
NAME		perce	4.1 ITILE 4. 2 NAME	1		Vilalit	
STREET ADDRESS			4.3 STREET ADDRES	is			
CITY-ST-ZIP			4.4 CITY-ST-ZIP	~			
TITLE		☐ DELETE	5.1 TITLE	 -		☐ Chang	e Addition
NAME			5.2 NAME			-	
STREET ADDRESS		•	5.3 STREET ADDRES	s			
CITY-ST-ZIP			5.4 CITY-ST-ZIP				i
TITLE		☐ DELET e	6.1 TITLE			☐ Chang	e Addition
NAME			6.2 NAME				ļ
STREET ADDRESS			6.3 STREET ADDRES	s			
CITY-ST-ZIP			6.4 CITY - ST - ZIP				

14. Thereby 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.