

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F95000006085 (3)**

1. Corporation Name

PEGNATO & PEGNATO ROOF MANAGEMENT, INC.



Principal Place of Business

**13101 WASHINGTON BLVD., SUITE 209
LOS ANGELES CA 90066**

Mailing Address

**13101 WASHINGTON BLVD., SUITE 209
LOS ANGELES CA 90066**

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**KAEIN, STEVE
1502 S. HIAWASSEE RD.
ORLANDO FL 32835**

3. Date Incorporated or Qualified

12/13/1995

3a. Date of Last Report

4. FEI Number

95-4391795

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81

Name

82

Street Address (P.O. Box Number is Not Acceptable)

83

84

City

FL

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when first filing)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**PD
PEGNATO, MARYELLA
13101 WASHINGTON BLVD., SUITE 209
LOS ANGELES CA 90066**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**V
GILBERTSON, MARK
13101 WASHINGTON BLVD., SUITE 209
LOS ANGELES CA 90066**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**ST
OVEREEM, MARK
13101 WASHINGTON BLVD., SUITE 209
LOS ANGELES CA 90066**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**C
PEGNATO, WILLIAM
13101 WASHINGTON BLVD., SUITE 209
LOS ANGELES CA 90066**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

**Vice President
William Baley
13101 Washington Blvd, Suite 209
Los Angeles, CA 90066**

☐ Change

☒ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

**Secretary/Chief Financial Officer
Mark Overeem
13101 Washington Blvd, Suite 209
Los Angeles, CA 90066**

☐ Change

☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☐ Change

☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

☐ Change

☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☐ Change

☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change

☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

Mark R. Overeem

Mark R. Overeem

3/28/96

310 594-3820

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)