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PROFIT CORPORATION ANNUAL REPORT
1997

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	Mailing Address
13101 WASHINGTON BLVD., SUITE 209 LOS ANGELES CA 90066	13101 WASHINGTON BLVD., SUITE 209 LOS ANGELES CA 90066-5100

3. Date Incorporated or Qualified: 12/13/1995	3a. Date of Last Report: 04/04/1996
4. FEI Number: 95-4391795	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
21 310 Washington Blvd.	26 310 Washington Blvd.
Suite, Apt. #, etc.: 22 205	Suite, Apt. #, etc.: 27 205
City & State: 23 Marina del Rey, CA	City & State: 28 Marina del Rey, CA
Zip: 24 90292 Country: 25 Los Angeles	Zip: 29 90292 Country: 30 Los Angeles

9. Name and Address of Current Registered Agent

KAELIN, STEVE
1502 S. HIAWASSEE RD.
ORLANDO FL 32835

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE		☒ Change ☐ Addition
NAME	PEGNATO, MARYELLA		1.2 NAME		
STREET ADDRESS	13101 WASHINGTON BLVD., SUITE 209		1.3 STREET ADDRESS	310 Washington Blvd., Suite 205	
CITY-ST-ZIP	LOS ANGELES CA 90066		1.4 CITY-ST-ZIP	Marina del Rey, CA 90292	
TITLE	V	☐ DELETE	2.1 TITLE		☒ Change ☐ Addition
NAME	GILBERTSON, MARK		2.2 NAME		
STREET ADDRESS	13101 WASHINGTON BLVD., SUITE 209		2.3 STREET ADDRESS	310 Washington Blvd., Suite 205	
CITY-ST-ZIP	LOS ANGELES CA 90066		2.4 CITY-ST-ZIP	~~Los Angeles CA~~ Marina del Rey, CA 90292	
TITLE	S	☐ DELETE	3.1 TITLE	Vice President	☒ Change ☐ Addition
NAME	MARK, OVEREEM		3.2 NAME		
STREET ADDRESS	13101 WASHINGTON BLVD SUITE 209		3.3 STREET ADDRESS	310 Washington Blvd., Suite 205	
CITY-ST-ZIP	LOS ANGELES CA		3.4 CITY-ST-ZIP	Marina del Rey, CA 90292	
TITLE	C	☐ DELETE	4.1 TITLE		☒ Change ☐ Addition
NAME	PEGNATO, WILLIAM		4.2 NAME		
STREET ADDRESS	13101 WASHINGTON BLVD., SUITE 209		4.3 STREET ADDRESS	310 Washington Blvd., Suite 205	
CITY-ST-ZIP	LOS ANGELES CA 90066		4.4 CITY-ST-ZIP	Marina del Rey, CA 90292	
TITLE	V	☐ DELETE	5.1 TITLE		☒ Change ☐ Addition
NAME	BALEY, WILLIAM		5.2 NAME		
STREET ADDRESS	13101 WASHINGTON BLVD SUITE 209		5.3 STREET ADDRESS	310 Washington Blvd., Suite 205	
CITY-ST-ZIP	LOS ANGELES CA		5.4 CITY-ST-ZIP	Marina del Rey, CA 90292	
TITLE		☐ DELETE	6.1 TITLE	Chief Financial Officer	☐ Change ☒ Addition
NAME			6.2 NAME	Beverly Pegnato	
STREET ADDRESS			6.3 STREET ADDRESS	310 Washington Blvd., Suite 205	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	Marina del Rey, CA 90292	

CR2E034 (9/96)

14. I do 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.

SIGNATURE: SIGNATURE REQUIRED Beverly R. Pegnato 3/11/97 (310) 574-7447
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #