FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

FILED
Apr 21 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **G65116** **(7)**

1. Corporation Name
ADVANCED ROOFING, INC.

Principal Place of Business	Mailing Address
4345 N.E. 12TH TERRACE FT LAUDERDALE FL 33334	4345 N.E. 12TH TERRACE FT LAUDERDALE FL 33334-4724

3. Date Incorporated or Qualified: **10/08/1983**
3a. Date of Last Report: **05/01/1996**

2. Principal Place of Business (21) | 2a. Mailing Address (26)
Suite, Apt. #, etc. (22) | Suite, Apt. #, etc. (27)
City & State (23) | City & State (28)
Zip (24) Country (25) | Zip (29) Country (30)

4. FEI Number: **59-2360591** ☐ 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

9. Name and Address of Current Registered Agent

KORNAHRENS, ROBERT
4000 NE 31 AVE.
LIGHTHOUSE POINT FL 33062

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 4345 NE 12th Terrace
83
84 City: Ft. Lauderdale FL 85 Zip Code: 33334

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	PTD	☐ DELETE	1.1 TITLE	☒ Change ☐ Addition
NAME	KORNAHRENS, ROBERT		1.2 NAME	
STREET ADDRESS	4000 NE 31 AVE.		1.3 STREET ADDRESS	4345 NE 12th Terrace
CITY-ST-ZIP	LIGHTHOUSE POINT FL		1.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33334
TITLE	VD	☐ DELETE	2.1 TITLE	☒ Change ☐ Addition
NAME	KORNAHRENS, DEBORAH		2.2 NAME	
STREET ADDRESS	4000 NE 31 AVE.		2.3 STREET ADDRESS	4345 NE 12th Terrace
CITY-ST-ZIP	LIGHTHOUSE POINT FL		2.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33334
TITLE	ST	☐ DELETE	3.1 TITLE	☒ Change ☐ Addition
NAME	PAIN, DAVID D.		3.2 NAME	
STREET ADDRESS	2121 N. CONFERENCE DR.		3.3 STREET ADDRESS	4345 NE 12th Terrace
CITY-ST-ZIP	BOCA RATON FL 33486		3.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33334
TITLE	VP	☐ DELETE	4.1 TITLE	☒ Change ☐ Addition
NAME	STOKES, DANIEL		4.2 NAME	
STREET ADDRESS	8442 NW 57 DR.		4.3 STREET ADDRESS	4345 NE 12th Terrace
CITY-ST-ZIP	CORAL SPRINGS FL 33067		4.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33334
TITLE	PD	☒ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	KORNAHERNNS, ROBERT		5.2 NAME	
STREET ADDRESS	7709 SW 7 COURT		5.3 STREET ADDRESS	
CITY-ST-ZIP	NORTH LAUDERDALE FL		5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

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] 4/-14-97 954 522 6868
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0269797