954/522-6868

3/21/01

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr 02, 2001 8:00 am Secretary of State **DOCUMENT # G65116** 1. Entity Name ADVANCED ROOFING, INC. 04-02-2001 90367 001 ***600.00 Principal Place of Business Mailing Address 4345 N.E. 12TH TERRACE 4345 N.E. 12TH TERRACE FT LAUDERDALE FL 33334 FT LAUDERDALE FL 33334 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-2360591 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KORNAHRENS, ROBERT Street Address (P.O. Box Number is Not Acceptable) 4345 NE 12TH TERRACE FT LAUDERDALE FL 33334 Zip Code City 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ■ Addition CR2E034 (10/00 ☐ Delete TITLE ☐ Change KORNAHRENS, ROBERT NAME NAME STREET ADDRESS 4345 NE 12TH TERRACE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME KORNAHRENS, DEBORAH NAME STREET ADDRESS 4345 NE 12TH TERRACE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL STPD NORTH , ROBERT 4345 NE 12 Terrace TITLE Sc Delete TITLE Change ☐ Addition PAIN, DAVID D. NAME NAME STREET ADDRESS 4345 NE 12TH TERRACE STREET ADDRESS Ft. Lauderdale, FL 33334 CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL TITLE ☐ Defete TITLE [] Change ☐ Addition NAME STOKES, DANIEL NAME 4345 NE 12TH TERRACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.