2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G65116

1950 NW 22 STREET

FORT LAUDERDALE, FL 33311

Address:

City-St-Zip:

FILED Mar 09, 2009 Secretary of State

Entity Nam	ne: ADVANC	ED ROOF	ING, INC.				
Current Principal Place of Business:				New Princi	New Principal Place of Business:		
1950 NW 2 FORT LAU	2 STREET DERDALE, FI	L 33311					
Current Mailing Address:				New Mailin	New Mailing Address:		
1950 NW 2 FORT LAU	2 STREET DERDALE, FI	L 33311					
FEI Number: 59-2360591 FEI Number Applied For () FEI Number				FEI Number Not Appli	cable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and A					Address of N	lew Registered Agent:	
1950 NW 22 STREET 2					COHEN, MICHAEL J 2100 NW 21 AVENUE FORT LAUDERDALE, FL 33311 US		
The above in the State		submits thi	s statement for the pu	rpose of changing it	s registered o	ffice or registered agent, or both,	
SIGNATURE: MICHAEL J COHEN					03/09/2009		
Electronic Signature of Registered Agent				nt	Date		
Election Cam	paign Financin	g Trust Fund	d Contribution ().				
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PDST () KORNAHRENS 1950 NW 22 S' FORT LAUDER	TREET	3311	Title: Name: Address: City-St-Zip:	()) Change()Addition	
Title: Name: Address: City-St-Zip:	V () KORNAHRENS 1950 NW 22 S' FORT LAUDER	TREET		Title: Name: Address: City-St-Zip:	()) Change ()Addition	
Title: Name:	V () STOKES, DANI) Delete EL		Title: Name:	()) Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: ROBERT P KORNAHRENS P 03/09/2009