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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

ANNUAL REPORT 1996					Secretary of State DIVISION OF CORPORATIONS								
DOCUMENT # G93712 1. Corporation Name					(9)								
BNW	ROOFING	i, INC.							A PERMINI RRIB RRIBE IRNIP NOTA	 31 014 0101 4	PER BIEN BIEN BU	III SKRIT RIBIE 1882	
Principal Place	of Business			 Ma	ailing Address								
1018 NEBRASKA AVE. PALM HARBOR FL 34683 US				P. O. BOX 925 PALM HARBOR FL 34682 US			3. Date incorporated or Qualifie	d [3a.	Date of Last B	epart [
21 26					. Maling Address				03/23/1984 4. FET Number 59-2388819			Applied For Not Applicable	
Suite, Apt. #, etc. 27				27	Suite, Apt. #, etc.			5. Certificate of Status Desired	[]	•	Additional Required		
City & State				28	City & State				Election Campaign Financing Trust Fund Contribution	[]		May Be d to Fees	
Zip 24	Country 25 29			29	Zip	30 Co	Gountry 30		8. This corporation has liability for Florida Statules	199.032,			
			ress of Curren	Regis	tered Agent		81	Name	10. Name and Address of New	Register	red Agent		
605 PA P.O. B	WILLIAM F ALM BLVD., IOX 1056 DIN FL 3469	SUITE					83	Street Addre	ess (F.Ö. Box Number is Nat Accept		=	o Code	
11. Pursuant to or registere familiar wit	to the provisioned agent, or the thin, and accept	ns of Ser ooth, in th t the obli	ctions 607.0502 ne State of Floric gations of, Secti	and 60 la. Such on 607.6	7.1508, Florida Statute i change was authorize 0506, Florida Statutes.	s, the abo	J.J. ove na corpo-	med corpora ation's board	thon submits this statement for the pilot directors. Thereby accept the a			egistered office agent. Lam	
SIGNATURE _	Signature, typed o	r printed nar	ne of registereo agenti:	and tile if a	applicable (NO)	t Registeres	d Agent s	CHANGE IN THE SOL	sakelo ne o obelo gli	£141	l t		<u> </u>
12.	-3		OFFICERS AND			13.		<u> </u>	ADDITIONS/CHANGES TO O			RS IN 12	200
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14. Too 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 trusted 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 attackment with an address.

6 4 CITY - ST - ZIF

6 1 TITLE

6.2 NAM:

5.4.011Y-\$1-7IP

6.3 STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

1/16/46

813-786-2325

Change

Addition