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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # H21176

(3)

Ciciporatio i Name

BYRNE ROOFING, INC.

Principal Place of Business

Mailing Address



1351 RANCHETTE RD. WEST PALM BEACH FL 33415		1351 RANCHETTE RD. WEST PALM BEACH FL 33415						
					3. Date Incorporated or Qualified 08/31/1984	3a. Date (of Last F 03/19	•
2. Prinopal Pl	lace of Business	2a. Mailing Address			4. FEI Number			Applied For
21		26			59-2515131		\prod	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc			5. Certificate of Status Desired			5 Additional Required
City & Stati	le	City & State			6. Election Campaign Financing			O May Be
:3		28			Trust Fund Contribution			ed to Fees
<i>Ζ</i> φ	Country	— ·	Zip Country		8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes 170			
24	[25]	29	30		Florida Statutes Yes 10. Name and Address of New R		cent	
	9. Name and Address of Curr	ent Registered Agent		B1 Name	Id. Haine and Address of New Y	ogietei eu A	gont	
	, JOSEPH R.		82 Street Add		Idress (P.O. Box Number is Not Acceptable)			
	ANCHETTE RD.		83					
WEST	PALM BEACH FL 33415			00				
				84 City		FL	85 Z	Zip Code
			1		ration submits this statement for the pur		l l	repistered office
or registe	ered agent, or both, in the State of Fic vith, and accept the obligations of, Se	orida. Such change was auth	horized by the c	orporation's boa	and of directors. I hereby accept the app	ointment as i	registere	ed agent. I am
SIGNATURE	Signature: typind or printed name of registered ag	and and title it soulli at Se	(NO*E Registered	Agent signature require	ed when reinstating)	DATE		
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECT	ORS IN 12
UI: f	DP	DELETE	1, 1 TI	īLE] Change	Addition
NAME	BYRNE, JOSEPH R.	_	1 2 NA	ME				
	AREA BANGUETTE DE			REET ADDRESS				
				TEXT FIRST TEXT				
STREET ADDRESS			14.00	V. ST. 7ID				
CITY - S1 - ZIF	WEST PALM BEACH FL	□ DELETE		Y-S1-ZIP		Г] Change	Addition
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14. I do 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 in 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 lychanged, or on an attachment with an address.

SIGNATURE:

JUNE OF THE OR PRINTED AND OF SIGNING OFFICER OF DIRECTOR

1-29-96 (401)471-836

CR2E034 (12/9)