## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(0)

J. D. WATERPROOFING, INC.

## **FILED** Apr 18 1997 8:00am Secretary of State

VIII VI	ALEM HOOFING, INC.									
Principal Plac	e of Business	Mailing Address							il <b>818</b> 15 1 <b>0\$</b> 1	
819 SE STH A DEERFIELD BI	IVE EACH FL 33441	819 SE 8TH AVE DEERFIELD BEACH FL 33	1441-5609							
						3. Date Incorporated or Qualified 04/14/1987	3a. Date 05/0	of Last F 1/1996	₹eporl	
2. Principal P	2a. Mailing Address	ng Address			4. FEI Number			pplied For	_	
Sulte, Apt.	# alc	Suite, Apt. #, etc.				59-2812302   Not Applical \$8.75 Additional				긱
22	1, 00.	27				5. Certificate of Status Desired Fee Regulred				1
City & State		City & State				6. Election Campaign Financing		\$5.00	May Be	7
23		28	<del></del>			Trust Fund Contribution				
Zip	Country	Zip	Cour	ntry		8. This corporation has liability for intangible tax under s. 199.			s. 199.032,	
24	25   29   30   g. Name and Address of Current Registered Agent		[30]	Florida Statutes Yes						
OF/	<del></del>	Hogietered Agent		81	Name	10. Name and Address of New Het	IISTOTOU AN	- I		$\dashv$
	Brino, James J. 9 S.E. 12th St.		Ļ							
	ERFIELD BEACH FL 33441			82	Street Addre	ss (P.O. Box Number is Not Acceptable	e)			
·	CHIELD BENOTHE SOVY		Ì	83						1
ŗ.			-	84	City			<b>B5</b> Zip	Code	4
*							- FL			1
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Statut of Florida, Such change was a	es, the ab authorized	ove-	named corpo	ration submits this statement for the pu on's board of directors. I hereby accep	rpose of c	nanging it	ts registered	
agent. I a	m familiar with, and accept the obligat	tions of, Section 607.0505, Fl	orida Statu	ites.			was specific	ii	· · · · · · · · · · · · · · · · · · ·	
SIGNATURE	Signature, typed or printed name of registered agen	t and tille it applicable (NO)	F Begistered	Anent	Pincaluro recuitor	d when roinstaling)	DATE			
12,	OFFICERS AND	<del></del>	13.	Agent	Biginato e reduitet	ADDITIONS/CHANGES TO OFFICE		URECTOE		7
TITLE	P	☐ DELETE	1.1 TITLE			'		Change	Addition	
NAME	DEBRINO, JAMES J.		1.2 NAME							
STREET ADDRESS	1109 S.E. 12TH ST.		1.3 STREET ADDRE		DORESS					
CITY-ST-ZIP	<u>DEERFIELD BEACH FL</u>		1.4 CIT		ZIP			<del></del>		_ Ş
TITLE	8	☐ DELETE	2.1 1(1)				L.	J Change	Addition	۱۱
NAME	DEBRINO, KATHLEEN K.		2.2 NAI							
STREET ADDRESS	1109 S.E. 12TH ST. DEERFIELD BCH. FL				DDRESS					1
CITY-ST-ZIP TITLE	VP	DELETE	2 4 CIT		- 214			Change	Addilion	1
NAME	ROBINSON, GREGORY	<del></del>	3.2 NAI				_	- •		
STREET ADDRESS	22751 PICKEREL CIRCLE		3.3 STREET		DDRES\$					
CITY-ST-ZIP	<b>BOCA RATON FL</b>		3.4. Ci1	ry-st	- ZIP					
TITLE	VP	DELETE	4.1 TITU	LF.		-	L	Change	Addition	, Ī
NAME	PARENT, MARC	, ,	4. 2 NA	ME						ı
STREET ADDRESS	955 S.E. 5TH STREET		4.3 STREE		DDRESS					
CITY-ST-ZIP	DEERFIELD BEACH FL		4.4 CIT		ZIP			<del>-</del>		
TITLE		☐ DELETË	5.1 1/11				L	_ Change	Addition	
NAME			5.2 NAME		200000					
STREET ADDRESS					DDRESS					
CITY-ST-ZIP TITLE		DELETE	5.4 Cit 6.1 Titl		218		Г	Change	Addition	-
NAME			6.2 NAM				<b>L</b>	a onungo	Lag Modition	
STREET ADDRESS					ODRESS					
CITY-ST-ZIP			6.3 STREET ADDRESS 6.4 CITY - ST - ZIP							
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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.