05-04-1999 90135 019 ***158.75

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # IQAQ1

1. Corporation U.S.A. R	OOFING SUPPLY, INC.										
Principal Place	of Business	M	lailing Address				1	()B())(() () () () () () () ()			
1207-44TH AVE. EAST 1207-44TH AVE. EAST BRADENTON FL 34203 BRADENTON FL 34203							DO NOT WRITE IN THIS SPACE				
								 Date Incorporated or Qualifed 09/30/1987 			
2. Principal Pl	ace of Business	2a	. Mailing Address					4. FEI Number 65-0007270			olied For Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.	•	-			5. Certifcate of Status Desired	×	\$8.75 A Fee Re	I
22		27	City & State					6. Election Campaign Financing		\$5.00	May Do
City & State		28	Oily & State					Trust Fund Contribution		Added to	
23 Zip	Country	28	Zip	Co	untry			8. This corporation owes the cur	rent vear		
<u> </u>	25	29		30	,		}	Personal Property Tax.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		□No
24	9. Name and Address of Curren		stered Agent		Т			10. Name and Address of New	Registere	d Agent	
-					81	Name				•	
SAM	uels, william f.				02	C44	Addros	s (P.O. Box Number is Not Accep	nhla)		
1207 44TH AVENUE EAST					82	Street	Addres	s (P.O. Box Number is Not Accep	abio)		
Bradenton Fl 34203					83						
					_				_	. 85 Zip C	odo.
					84	City		· ·	F	L 85 Zip C	,oue
office or re agent. I at SIGNATURE	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Flor tions o	ida. Such change w f, Section 607.0505	tatutes, the as authorize, Florida Sta	a by tutes	tne corpo	oration	s board of directors. Thereby acce	pt the app	ointment as rec	gistered
12.	Signature, typed or printed name of registered age OFFICERS AN			13		ii signature r	requireo **	ADDITIONS/CHANGES TO O		AND DIRECTO	RS IN 12
TITLE	PDT	0 011	DELETI		TLE					Change	Addition
NAME	SAMUELS, WILLIAM F.		_		IAME						;
STREET ADDRESS	4305 MORGAN JOHNSON RD.					FADDRESS					
1	BRADENTON FL			1	CITY-S		1				
CITY-ST-ZIP	VD		☐ DELET	_	TTLE		VS			Change	☐ Addition
NAME	GLASGOW, LOYD H.		_		AME.		2 برا	•		•	1
STREET ADDRESS	1209 44TH AVE. E.		:			TADORESS					
CITY-ST-ZIP	BRADENTON FL				CITY-S						·
TITLE	VMS		DELET		TTLE					Change	Addition Addition
NAME	BOUCHARD, RICHARD J.				AME		Ì		•		
STREET ADDRESS	3620 34TH ST. E	•		3.3 3	TREE	T ADDRESS				•	
CITY-ST-ZIP	BRADENTON FL			3.4.	CITY-S	ST- ZIP		,			
TITLE		_	☐ DELET	E 4.1	TLE					☐ Change	☐ Addition
NAME				4, 2	NAME		1				
STREET ADDRESS				4.3	TREE	TADDRESS					
CITY-ST-ZIP	·			4.4 (CITY-S	T-ZIP					
TITLE			☐ DELET		TTLE					Change	☐ Addition
NAME				5.21	IAME					•	J
STREET ADDRESS				5.3	TREE	T ADDRESS					ļ
CITY-ST-ZIP				5.4	ary-s	T-ZIP					
TITLE			DELET	E 6.1	TILE					☐ Change	☐ Addition

14. 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 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 apachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE: <u></u>

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

4-28-97 941-756-4259
Date Daytime Phone #