FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 PM 5:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K18868 (5)

1. Corporation Name
ALHAMBRA ROOFING & INSULATION CORP.

Principal Place of Business: ~~362 MINORCA AVE CORAL GABLES FL 33134 US~~

Mailing Address: ~~362 MINORCA AVE CORAL GABLES FL 33134~~ US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	03/23/1988
3a. Date of Last Report	02/17/1994
4. FEI Number	65-0038254 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired	X — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes	X Yes ☐ No

	2. Principal Place of Business		2a. Mailing Address
21	745 NW 54 ST	26	745 NW 54 ST.
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.
23	City & State: Miami FL	28	City & State: Miami FL
24	Zip: 33127	29	Zip: 33127
25	Country: USA	30	Country: USA

9. Name and Address of Current Registered Agent

DEL SOL, DANIEL
~~362 MINORCA AVE~~
~~CORAL GABLES FL 33134~~

10. Name and Address of New Registered Agent

81 Name	Del Sol, DANIEL
82 Street Address (P.O. Box Number is Not Acceptable)	745 NW 54 ST
83	
84 City	Miami FL
85 Zip Code	33127

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position under Florida Statutes.

SIGNATURE [signature] Daniel DEL Sol 4-4-95

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	DEL SOL, DANIEL
STREET ADDRESS	~~433 CADAGUA ST~~
CITY-ST-ZIP	~~CORAL GABLES FL~~
TITLE	V
NAME	BUERGO, OMAR
STREET ADDRESS	~~3102 SW 139 CT~~
CITY-ST-ZIP	~~MIAMI FL~~

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	X Change ☐ Addition
NAME	DEL SOL DANIEL	
STREET ADDRESS	8651 N.E. 10 CT.	
CITY-ST-ZIP	Miami FL 33138	
TITLE		X Change ☐ Addition
NAME		
STREET ADDRESS	10510 SW 42 ST	
CITY-ST-ZIP	Miami FL 33165	

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(1)(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.

SIGNATURE: [signature] Daniel Del Sol 4-4-95 (305)417-1610

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0130316 CP