SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997

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Zip

CITY-ST-ZIP

City & State



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

(6)

MCCARTHY ROOFING, INC.

MC CARTHY, ROBERT A. 331 CHERRY DR.

SATELLITE BEACH FL 32937

Principal Place of Business	Mailing Address	
331 CHERRY DR 331 CHERRY DR. SATELLITE BEACH FL 32937 US	% ROBERT A. MC CARTHY 331 CHERRY DR. SATELLITE BEACH FL 32837	
2. Principal Place of Business	2a. Mailing Address 26	
Culto Ant # etc	Cuito Ant # oto	

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9. Name and Address of Current Registered Agent

City & State

Zip

SECRETARY OF STATE ALLAHASSEE. FLORIDA

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 04/12/1989 04/30/1996 4, FEI Number Applied For 59-2969692 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes Yes 10. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) 400002251614----07/29/97--01131--002 ****165.00

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 eacht, 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 Section 607.0505, Florida Statutes. Carela (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE Change ■ Addition MC CARTHY, ROBERT A. NAME 1.2 NAME 331 CHERRY DR. STREET ADDRESS 1.3 STREET ADDRESS **SATELLITE BEACH FL** CITY-ST-ZIP 1.4 CITY - ST - ZIP VST DELETE Change Addition TITLE 2.1 TITLE MC CARTHY, JANICE M. 2.2 NAME 331 CHERRY DR. STREET ADDRESS 2.3 STREET ADDRESS SATELLITE BEACH PL CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition MC CARTHY, JANICE M. NAME 3.2 NAME 331 CHERRY DR. STREET ADDRESS 3.3 STREET ADDRESS SATELLITE BEACH FL CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS**

Country

B1 Name

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84 City

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14. 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 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 chapters, or on an attachment with an address.

6.4 CITY-ST-ZIP