


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jul 22, 2004 8:00 am**  
**Secretary of State**

07-22-2004 90008 006 \*\*\*150.00

<b>DOCUMENT # K81895</b>					
1. Entity Name <b>BISCAYNE ROOFING OF MIAMI, INC.</b>					
Principal Place of Business <b>1070 E. 52ND ST. HIALEAH, FL 33013</b>			Mailing Address <b>1070 E. 52ND ST. HIALEAH, FL 33013</b>		
2. Principal Place of Business <i>Same as Above</i>		3. Mailing Address <i>Same as Above</i>			
Suite, Apt. #, etc. <i>Same</i>		Suite, Apt. #, etc. <i>Same</i>			
City & State <i>Same</i>		City & State <i>Same</i>			
Zip	Country	Zip	Country	4. FEI Number <b>65-0111303</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent <b>LAING, RONALD A 1070 E 52 ST HIALEAH, FL 33013</b>				7. Name and Address of New Registered Agent	
Name				Street Address (P.O. Box Number is Not Acceptable)	
City				FL Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	LAING, RONALD A.		NAME		
STREET ADDRESS	1070 E 52 ST		STREET ADDRESS		
CITY-ST-ZIP	HIALEAH, FL 33013		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	SEGGARA, STEVEN		NAME		
STREET ADDRESS	116 NW 24TH ST APT 7		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33127		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	SERIFAN, MILLAN		NAME		
STREET ADDRESS	3530 NW 170 ST		STREET ADDRESS		
CITY-ST-ZIP	OPA LOCKA, FL 33054		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	RHOME, THOMAS		NAME		
STREET ADDRESS	20026 NW 32 PLACE		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33054		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Ronald A. Laing</i>			Date: <i>7/16/04</i> Daytime Phone #: <i>305-688-71603</i>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		

44049471



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**Division of Corporations**

**2004 Annual Report**

**Listed below is the most recent information reported for the entity.  
Please review and click the appropriate button at the bottom to generate the annual report form.**

This information cannot be changed on the report.	
Document Number	K81895
Business Entity Name	BISCAYNE ROOFING OF MIAMI, INC.
Original File Date	04/20/1989

FEI Number 65-0111303

Principal Address 1070 E. 52ND ST.  
HIALEAH, FL 33013

Mailing Address 1070 E. 52ND ST.  
HIALEAH, FL 33013

Registered Agent LAING, RONALD A  
1070 E 52 ST  
HIALEAH, FL 33013 US

**Officer/Director Name And Address**

D  
LAING, RONALD A.  
1070 E 52 ST  
HIALEAH, FL 33013

D  
STEVEN SEGGARA  
116 NW 24TH ST APT 7  
MIAMI, FL 33127

D  
MILLAN SERIFAN  
3530 NW 170 ST  
OPA LOCKA, FL 33054

D  
THOMAS RHOME  
20026 NW 32 PLACE  
MIAMI, FL 33054

*Att. Edward*  
44049471

#K 81898

After May 1 of each year, a late charge of \$400.00 is imposed, except in circumstances in which the entity did not receive prior notice. Please check this box if notice was not received.

If all of the above information is correct and you do not wish to make any changes,

please select:

No Changes

If you need to make changes to the above information, please select:

Make Changes

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