

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K89096

1. Entity Name

AMERICAN ROOF TECHNOLOGY, INC.

FILED
Apr 23, 2000 8:00 am
Secretary of State

04-23-2000 90029 015 ***150.00

Principal Place of Business

1940 NW 44 STR
% ROBERT J. JOHNSON JR.
POMPANO BEACH FL 33064
US

Mailing Address

6574 N STATE RD 7
STE. 295
COCONUT CREEK FL 33073-3625
US

2. Principal Place of Business

23142 Sandalfoot Plaza Dr.

3. Mailing Address

Suite, Apt. #, etc.

City & State

Boca Raton

City & State

Zip

Country

33428 USA

Zip

Country

4. FEI Number

65-0118678

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JOHNSTON, ROBERT G JR.
6574 N STATE RD 7
STE. 295
COCONUT CREEK FL 33073

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
C
JOHNSTON, ROBERT G. JR
6574 N STATE RD 7, STE. 295
COCONU CREEK FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Vice President
Gerald Archard
6574 N. State Rd 7
Coconut Creek FL 33073 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ST
JOHNSTON, BETTY PATRICIA
6574 N STATE RD 7, STE. 295
COCONUT CREEK FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
JOHNSTON, ROBERT G JR.
6574 N STATE RD 7, STE. 295
COCONUT CREEK FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/8/00 561-487-6222
Date Daytime Phone #

CR2E034 (9/99)