## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# K89096

Title:

Name:

Address:

City-St-Zip:

Entity Name: AMERICAN ROOF TECHNOLOGY, INC.

FILED Mar 31, 2003 Secretary of State

Current Principal Place of Business:					New Principal Place of Business:			
600 W. HILLSBORO BLVD STE 110-A					6574 NORTH STATE ROAD 7 #295			
DEERFIELI	D BEACH, FL	33441	US		COCONUT CREEK,	FL 33073	US	
Current Mailing Address:					New Mailing Address:			
6574 N STA STE. 295 COCONUT	ATE RD 7 CREEK, FL	33073	US					
FEI Number:	,		mber Applied For()	FEI Num	ber Not Applicable ( )	Certifica	ate of Status Desired (X)	
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:			
6574 N STA STE. 295	N, ROBERT ( ATE RD 7 CREEK, FL		JS					
The above in the State	named entity of Florida.	submits :	this statement for the	purpose of	changing its registere	ed office or r	egistered agent, or both,	
SIGNATUR	RE:							
Electronic Signature of Registered Agent							Date	
	npaign Financir S AND DIREC	_	und Contribution().		ADDITIONS/CHANG	ES TO OFF	FICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	C ( JOHNSTON, R 6574 N STATE COCONU CRE	RD 7, STE			Title: Name: Address: City-St-Zip:	( ) Change	( ) Addition	
Title: Name: Address: City-St-Zip:	ST ( JOHNSTON, B 6574 N STATE COCONUT CR	RD 7, STE			Title: Name: Address: City-St-Zip:	()Change	( ) Addition	
Title: Name: Address: City-St-Zip:	P ( JOHNSTON, R 6574 N STATE COCONUT CR	RD 7, STE			Title: Name: Address: City-St-Zip:	( ) Change	( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: BETTY JOHNSTON ST 03/31/2003

() Delete

MURRON, EDWARD

6574 N. STATE RD 7 #295

COCONUT CREEK, FL 33073

(X) Change ( ) Addition

MURTON, EDWARD

6574 N. STATE RD 7 #295

COCONUT CREEK, FL 33073