

**2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 29, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # L01000018271**

1. Entity Name  
**ROOF INDUSTRIAL PROPERTIES, L.L.C.**



Principal Place of Business

**6421 CONGRESS AVENUE, NO. 117  
BOCA RATON, FL 33487**

Mailing Address

**PO BOX 1330  
BOCA RATON, FL 33429**



04222004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number  
**65-1148916**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**ALPER, JONATHAN  
274 KIPLING COURT  
HEATHROW, FL 32746**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00  
Due by May 1, 2004**

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**MGRM  
ROOF, WILLIAM H  
2627 TRENTWOOD BLVD.  
ORLANDO, FL 32812**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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04-29-04-ROOF-0003 50.00

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #