

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000001592

Entity Name: RIGHTWAY ROOFING LLC

FILED
Jul 18, 2008
Secretary of State

Current Principal Place of Business:

212 BRINY AV
A-4
POMPANO BEACH, FL 33062

New Principal Place of Business:

8630 SW 3 ST
204
PEMBROKE PINES, FL 33025

Current Mailing Address:

212 BRINY AV
A-4
POMPANO BEACH, FL 33062

New Mailing Address:

8630 SW 3 ST
204
PEMBROKE PINES, FL 33025

FEI Number: 61-1516400 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CORREA, YANET
2544 CAMELOT CR
COOPER CITY, FL 33026 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: FIGUEROA, SANDRA L
Address: 220 MENDOZA AVE
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR (X) Delete
Name: HERIBERTO, CORREA SR
Address: 8630 SW 3 ST #204
City-St-Zip: PEMBROKE PINES, FL 33025

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CORREA, HERIBERTO
Address: 19121 NW 52 AVE
City-St-Zip: MIAMI GARDENS, FL 33055

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: HERIBERTO CORREA

MGR

07/18/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date