2001 UNIFORM BUSINESS REPORT (UBR)

May 11, 2001 8:00 am Secretary of State **DOCUMENT # L26317** 1. Entity Name ALL DAY ROOFING & WATERPROOFING INCORPORATED 05-11-2001 90115 039 ***150.00 Principal Place of Business Mailing Address 400 SOUTHWEST 7TH TERRACE 400 SOUTHWEST 7TH TERRACE CAPE CORAL FL 33991-2537 CAPE CORAL FL 33991-2537 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number 65-0162941 Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DAY, JANCE L Street Address (P.O. Box Number is Not Acceptable) 400 SW 7TH TERR SUITE 5 CAPE CORAL FL 33991 City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

Applied For

Not Applicable

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NAME	DAY, VANCE L		NAME			
STREET AODRESS	400 SW 7TH TERR		STREET ADDRESS			
CITY-ST-ZIP	CAPE CORAL FL 33991		CITY-ST-ZIP		,	
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NAME	DAY, SHEILA M	•	NAME	SHEILA .M. DAY		
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NAME	BURKE, JOHN	☐ Delete	NAME			Audition
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CITY-ST-ZIP	CAPE CORAL FL 33909		CITY-ST-ZIP			{
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TITLE	V(11 2 V V 11 12 V V V V V V V V V V V V V	☐ Delete	TITLE	VICE President	☐ Change	Addition
NAME		☐ Delete	TITLE NAME	VITE President Robert O'HATA	☐ Change	Addition
NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS	VITE President ROBLET O'HATA 3609 S.W. 11 th PL	☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP	VITE President ROBLET O'HATA 3609 S.W. 11 th PL CAPLE COTAL FL. 33914	☐ Change	Addition
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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.

FILED

ANCE L. DAY