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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DE PARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

L37161

(1)

JESSIE ROOFING CLEANING & PAINTING INC.

Principal Place of Business Mailing Address 1815 N PARK RD 1815 N PARK RD HOLLYWOOD FL 33021 HOLLYWOOD FL 33021 3. Date Incorporated or Qualified 3a. Date of Last Report 12/18/1989 03/17/1995 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business Not Applicable 65-0179596 26 21 \$8.75 Additional Suite, Apt. #, etc Suite, Apt. #, etc 5. Certificate of Status Desired Fee Required 22 City & State 6. Election Campaign Financing \$5.00 May Be City & State Γ Trust Fund Contribution Added to Fees 28 23 Country This corporation has liability for intangible tax under s. 199.032, Country Zιο ☐ Yes ☐ No Florida Statutes 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SWARTZ, GARY L. 82 Street Address (P.O. Box Number is Not Acceptable) **1815 N PARK RD** R3 HOLLYWOOD FL 33021 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's poard of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SWARTZ CR2E034 (12/95) TIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change ____ Addition DELETE 1 1 Ince TITLE 1.2 NAME NAME SWARTZ, GARY L. 1815 N PARK RD 1.3 STREET ADDRESS STHEET ADDRESS HOLLYWOOD FL 1.4 City - \$1 - ZIP C-TY - ST - ZIP Change Addition DELETE 2.131111 THILE QUINTER, SWARTZ R 2.2 NAM5 NAME 1815 N PARK RD 23 STREET ADDRESS STREET ADDRESS HOLLYWOOD FL 2 4 CiTY - ST - ZIP CHY-ST ZIP Addition DELETE Change 3 1117LF 11114 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADORESS 3.4 CITY: \$1-7IP CITY - ST- ZIP Change Add tion DELETE 4 1 TUTLE THEF 4.2 NAME NAMÉ 4.3 STREET ADORESS STREET ADDRESS 44 CITY - ST - ZIF CITY-ST-ZIP ☐ Change Addition DELETE 5 1 T/TLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - \$1 - 7IP CITY - ST - ZIP Addition DELETE 6 1 Title THLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST- 7IP CITY-ST-ZIE 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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

SIGNATURE:

Kuth Quenter - Juant

4-1-96

(954) 987-9181