page lots

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L45821 1. Entity Name PDF Roofing Concepts	Inc.		03 \$	FILED EP 24 AN 9: 13 ETARY OF STATE HASSEE, FLORIDA
DO NOT WRITE	TALLA	HASSEE, FLUMIUM		
2. Principal Place of Business 3. Mailing Address Same Suite, Apt. #, etc. 3. Mailing Address Same Suite. Apt. #, etc.			000023554280 10/03/0301081030 **150.00 do not write in this space	
BradenTon, FL Zip Country	City & State	Country	4. FEI Number OS - 0168 334 5. Certificate of Status Desired	Applied For Not Applicable \$8.75 Additional
To Name and Address of Current Registered Agent Name Paul O. Fuel Street Address (P.O. Box Number is Not Acceptable) When the contract of Current Registered Agent Name Paul O. Fuel Street Address (P.O. Box Number is Not Acceptable) When the contract of Current Registered Agent Name Paul O. Fuel Street Address (P.O. Box Number is Not Acceptable)				
8. The above named entire 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 tasks agent and title if applicable. (NOTE: Registored Agent signature required when releastating) DATE				
January 1 - May 1 - Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State ### Added to Fees ### Added to Fees ### Added to Fees #### Added to Fees ### Added to Fees #### Added to Fees #### Added to Fees #### Added to Fees ##################################				
10. OFFICERS AND E TITLE NAME STREET ADDRESS CITY-SI-ZIP CAACACTON FL 34	T COUNTWEST	TITLE -NAME -STREET ADDRESSCHY-ST-ZIP		CR2E034B (12/02)
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		NAME STREET ADDRESS CITY-S1-ZIP		
12. 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 reserver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered. SIGNATURE: SIGNATURE: SIGNATURE OF PRINTED OR PRINTED O				

9/23/03

Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

To whom it may concern,

Please excuse PDF Roofing Concepts, Inc. from filing late our Uniform Business Report. We did not receive our renewal form, we have been having problems with our mail delivery all year. A new Postman has been assigned to our area and in the condominium we work in there are three separate units (6208A, 6208B, 6208C). We also have a new Bookkeeper and she is unaware of all the renewal dates for State and Local County filings. We would not have known of our filing status if one of our venders didn't called us and let us know of our State Status. Sorry for the inconvenience and we will make sure it doesn't happen again.

Sincerely

Orlando Santana Office Manager