FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name L94531

(5)

| DURA-BUILT ROOFING CO | MPANY, INC. | | |
|---|---|---|--|
| Principal Place of Business | Mailing Address | | |
| 443 PINELLAS BAYWAY 102 TIERRA VERDE FL 33715 US | 443 PINELLAS BAYWAY 102 TIERRA VERDE FL 33715 US | DO NOT WRITE IN THIS SPACE | |
| | | 3. Date Incorporated or Qualified 08/01/1990 | |
| 2 Principal Place of Business | 2a. Mailing Address | 4. FEI Number Applied | |

Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip Zip Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Nama PLANTHABER, ROBERT J., SR. 443 PINELLAS BAYWAY Street Address (P.O. Box Number is Not Acceptable) 102 83 TIERRA VERDE FL 33715 85 Zip Code City

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 board of directors. I hereby accept the appointment as registered

| agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, | | | | |
|---|--------------------------|--------------------|---|--|
| SIGNATURE Signature, typed or profed name of registroid agent and trife if applicable (NOTE Registered Agent signature required when reinstaling) DATE | | | | |
| 12. | OFFICERS AND DIRECTORS | 13. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
| TITLE | DP DELETE | 1.1 TITLE | Change Addition | |
| NAME | Planthaber, Robert J. Sr | 1.2 NAME | | |
| STREET ADDRESS | 443 PINELLAS BAYWAY 102 | 1.3 STREET ADDRESS | | |
| CITY - ST - ZIP | TIERRA VERDE FL | 1.4 CITY-ST-ZIP | | |
| TITLE | ☐ DELETE | 2.1 TITLE | Change Addition | |
| NAME | | 22 NAME | | |
| STREET ADDRESS | | 2.3 STREET ADDRESS | • | |
| CITY-ST-ZIP | | 2.4 CITY-ST-ZIP | | |
| TITLE | DELETE | 3.1 TITLE | Change Addition | |
| NAME | | 3.2 NAME | | |
| STREET ADDRESS | | 3.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | 3.4. CITY-ST-ZIP | | |
| TITLE | ☐ DELETE | 4.1 TITLE | Change Addition | |
| NAME | | 4. 2 NAME | | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | 4.4 CITY-ST-ZIP | | |
| TITLE | ☐ DELETE | 5.1 TITLE | Change Addition | |
| NAME | | 5.2 NAME | | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | | |
| TITLE | DELETE | 6.1 TITLE | Change Addition | |
| NAME | | 62 NAME | | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | | |
| | | - 1 | | |

6.4 CITY - ST - ZIP 14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

FILED

Apr 28 1998 8:00am

Secretary of State