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

PROFIT
CORECRATION
ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M41668

(8)

FILED Apr 14 1998 8:00am Secretary of State

1. Co. Figurior	Name	(-)			
ALL ROOF SERVICES, INC.					
•					A NDOISEAN FAN DIODH AIRDIR DHINN DANN AGANN BARNI
Principal Place of Business Mailing Address					i indigali ili didal wald dilib dilai idir albir alair alair alair alair alair alair
4575 CURTIS AVE 689 NE 6TH COURT 405					
LAKE WORTH	FL 33463	P.O. BOX 309			DO NOT WRITE IN THIS SPACE
us		BOYNTON BEACH FL 33425-7309			3. Date Incorporated or Qualified
					· · ·
9 Principal P	ace of Business	2a, Mailing Address			11/14/1986 4. FEI Number Applied For
 1	ace of Eldsiricss	26			59-2735447 Not Applicable
Suite, Apt	# atc	Suite, Apt. #, etc.			\$8.75 Additional
22		27			5. Certificate of Status Desired Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution
Zip Country		Zip Country		7	8. This corporation owes or has paid the current year Intangible
24	25	29	30		Personal Property Tax due June 30. 📈 Yes 🔲 No
<u></u>	g, Name and Address of Currer				10. Name and Address of New Registered Agent
CH	ALLMAN COMECT I		81	Name	9
SMALLMAN, ERNEST J.			00	Chand	at Address (P.O. Box Number is Not Acceptable)
	NE 6TH COURT UNIT 405		82	Street	1 Address (P.O. Box Number is Not Acceptable)
80	YNTON BEACH FL 33435		83		
			84	City	FL 85 Zip Code
44 Purguent to the provisions of Sections 607 0502 and 607 1508 Florida Statules, the			s the above	e-named	
office or r	egistered agent, or both, in the State	of Florida. Such change was au	thorized b	y the corp	d corporation submits this statement for the purpose of changing its registered orporation's board of directors. I hereby accept the appointment as registered
agent. La	m familiar with, and accept the oblig	ations of, Section 607.0505, Flor	iga Statute	S	
SIGNATURE	Signature, typed or printed name of registered ag	ery and the it emple able (NOTE:	Begistered Ac	ont signature	re required whon reinslating) DATE
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	V	DELETE	1.1 TITLE		Change Addition
NAME	SMALLMAN, ERNEST J.		1.2 NAME		
STREET ADDRESS	689 NE 6TH CT 405		1.3 STREE	1 ADDRESS	
CITY-ST-ZIP	BOYNTON BEACH FL		1.4 CITY-	ST- 7/P	
TITLE	PD	DELÈTE	2.1 TITLE		Change Addition
NAME	DURAN, BERNARDO		2.2 NAME		
STREET ADDRESS	8400 S.W. 5TH STREET		2.3 STREE	T ADDRESS	
CITY-ST-ZIP	MIAMI FL 33144				
TITLE	STD	DELETE	2. 4 CHY-S1-ZIP 3.1 TITLE		Change Addition
NAME	JACKSON, DAVID	the state of the s	3.2 NAME		
1	1108 W. PERRY ST.		3.3 STREET ADDRE		,
STREET ADDRESS			3.4. CITY-\$1-ZIP		<u>' </u>
CITY-ST-ZIP TITLE	LANTANA FL 33462	DELETE	4.1 TITLE	31-211	, Change Addition
NAME			4 2 NAMI		
1			•	I ADDRESS	
STREET ADORESS					·
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
i		En preside	5.1 THEE 5.2 NAME		
NAME CEDEET ADDOCCC	!			I ADDRESS	
STREET ADDRESS	i		5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		'
CITY-ST-ZIP		DELETE			Change Addition
TITLE		DECEL	6.2 NAME		vierige had represent
NAME					.
STREET ADDRESS			6.3 STREET ADDRESS		'
CITY-ST-ZIP		The state of the s	6.4 CBY-	S1-ZIP	stad in Caption 110 07/3/6) Florida Statutos I further certify that the information

1 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 informatio 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 trusted 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.

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