

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **M43271**

1. Corporation Name

Southwest Roofing Contractors Inc.

Principal Place of Business

**9319 W. Sample Rd
#201
Coral Springs
FL 33065**

Mailing Address

**P.O. Box 196
Angel Fire
NM 87710**

2. Principal Place of Business

2a. Mailing Address

21 **9319 W. Sample Rd**

26 **P.O. Box 196**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 **201**

27 City & State

23 **Coral Springs FL**

28 **Angel Fire NM**

Zip

Zip

24 **33065**

25 **Broward**

29 **87710**

30 **Colfax**

9. Name and Address of Current Registered Agent

**H.E. Greene
9319 W. Sample Rd.
Coral Springs FL
33065**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified

86

3a. Date of Last Report

95

4. FEI Number

59-2746070

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☒ No

10. Name and Address of New Registered Agent

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

H.E. Greene

(Print Name of Registered Agent Submitting Report on Behalf of the Corporation)

4/8/96

12. OFFICERS AND DIRECTORS

TITLE **President/Director** ☐ DELETE
NAME **Cynthia Buzette**
STREET ADDRESS **9319 W. Sample Rd.**
CITY-ST-ZIP **Coral Springs FL 33065**

TITLE ☐ DELETE
NAME
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CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

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*****200.00**

41 TITLE ☐ Change ☐ Addition

42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

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 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.

SIGNATURE:

H.E. Greene

(Signature and Typed or Printed Name of Signing Officer or Director)

4/8/96 1-305-255-2135

(Date and Phone)

CR2E034 (12/95)