

2005 FOR PROFIT CORPORATION ANNUAL REPORT

06-27-2005 90004 022 ***150.00
M49764


FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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05162005 Chg-P CR2E034 (10/03)

DOCUMENT # M49764					
1. Entity Name VICTOR'S ROOFING CO INC. OF THE FLA KEYS					
Principal Place of Business 6161 OVERSEAS HWY. MARATHON, FL 33050			Mailing Address 6161 OVERSEAS HWY. MARATHON, FL 33050		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-2834439	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
HARRIS, VICTOR 1134 CALLE ENSENADA MARATHON, FL 33050				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
8. The above named entity 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS					
TITLE	PD	<input type="checkbox"/> Delete			
NAME	HARRIS, VICTOR				
STREET ADDRESS	1134 CALLE ENSENADA				
CITY- ST- ZIP	MARATHON, FL				
TITLE	VP	<input type="checkbox"/> Delete			
NAME	HARRIS, EARLY W				
STREET ADDRESS	439 83 ST				
CITY- ST- ZIP	MARATHON, FL 3305				
TITLE	ST	<input type="checkbox"/> Delete			
NAME	HARRIS, MICHELLE				
STREET ADDRESS	1134 CALLE ENSENADA				
CITY- ST- ZIP	MARATHON, FL 33050				
TITLE		<input type="checkbox"/> Delete			
NAME					
STREET ADDRESS					
CITY- ST- ZIP					
TITLE		<input type="checkbox"/> Delete			
NAME					
STREET ADDRESS					
CITY- ST- ZIP					
TITLE		<input type="checkbox"/> Delete			
NAME					
STREET ADDRESS					
CITY- ST- ZIP					
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME					
STREET ADDRESS					
CITY- ST- ZIP					
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME					
STREET ADDRESS					
CITY- ST- ZIP					
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME					
STREET ADDRESS					
CITY- ST- ZIP					
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME					
STREET ADDRESS					
CITY- ST- 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.					
SIGNATURE: <u>Michelle Harris</u> <u>Michelle Harris</u> 6/23/05 305 743-7798					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					