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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARIMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUN 1. Corporation A-TEA	MENT # M633* M ROOFING INSPECTION	` '			
Principal Place of Business		Mailing Address			OOL IIEL OIGIE OIBII OIGIE OIBIE OIGIE BEON IOOI
6630 ARTHUR ST. HOLLYWOOD FL 33024-5733		6630 ARTHUR ST. HOLLYWOOD FL 33024-5733			
				3. Date Incorporated or Qualified 12/04/1987	3a. Date of Last Report 01/27/1995
2. Principal Pla	ce of Business	2a. Mailing Address 26		4. FE! Number 65-0072443	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be
3   Zip	Country	<b>28</b>	Country	8. This corporation has liability for	intangible tax under s 199.032,
4	25 9. Name and Address of Current	29 t Registered Agent	30	Florida Statutes 7 Yes  10. Name and Address of New F	
			81 Name		
MODAS	S, DANIEL A. <del>: Andrews ave:</del> 12/55.	EJAUE 420	2 Street Add	ress (P.O. Box Number is Not Acceptat	ole)
FT. LAI	UDERDALE FL 333/6		83		
	221.2		84 City		FL 85 Zip Code
12. Title	Signature: Typed or printed name of rejectored agent a OFFICERS AND PD		13. 1 TITLE	ADDITIONS/CHANGES TO OFF	DATE FICERS AND DIRECTORS IN 12 Change Addition
NAME STREET ADORESS	PATTERSON, CHARLES H. 6630 ARTHUR ST.		1.2 NAME 1.3 STREET ADDRESS		
DITY-ST-ZIP	HOLLYWOOD FL	DELETE	14 CITY - S7 - ZIP 2 : TITLE		Change Addition
THILE NAME SIBEET ADDRESS	STD PATTERSON, DIANNE 6630 ARTHIR ST.	<u>_</u>	22 NAME 23 STREET ADDRESS		
C TY-ST-ZIP	HOLLYWOOD FL		2.4 CITY - ST - ZIP		
TITLE NAME		☐ DELETE	3 1 THILE 3 2 NAME		Change Addition
STREET ADDRESS C:TY-ST-ZIP			3.3 STREET ADDRESS 3.4 CITY-ST-ZIP		
T-TLE NAME		☐ DELETE	4 1 TIFLE 4 2 NAME		Change Addition
STHEET ADDRESS			4.3 STREET ADDRESS		
DITY-ST-ZIP TITLE		DETELE	4.4 CHY+ST-ZIP 5.1 TITLE		Change Addition
NAME			5 2 NAME		(m) (9)
STREE! ADDRESS			5.3 STREET ADDRESS		
DITY-ST-ZIP TITLE		T] DELETE	5.4 CITY-S1-ZIP 6.1 TITLE		Change Addition
NAME		<u> </u>	6.2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CHTY-ST-7IP 14 I do bereby	certify that the information supplied y	with this filippus voluntarily fund	\$200 and does not qualify	for the exemption stated in Section 119	0.07(3)(k), Florida Statutes I further
certify that oath; that I	the information indicated on this appu	al report or supplemental annu ration or the receiver or trustee	µa <b>V</b> report is true and accura	ate and that my signature shall have the is report as required by Chapter 60?, F	e same legal effect as if made under
SIGNAT	URE: STENATURE AND TYPED OR	PANTA NAME OF SIGNING OFFICE	R OR DIRECTOR	Jule. 1 Man	M 96 (59)9 61-253