


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 10, 2004 08:00 AM
Secretary of State

DOCUMENT # P00000015256	
1. Entity Name S & L SIDING SPECIALIST INC.	

Principal Place of Business 13349 LUXBURY LOOP ORLANDO, FL 32837	Mailing Address 13349 LUXBURY LOOP ORLANDO, FL 32837
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06042004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3478642	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent TORO, RUBEN D 7345 SAND LAKE RD., STE. 204 ORLANDO, FL 32819
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**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST LACERDA, SAULO M 13349 LUXBURY LOOP ORLANDO, FL 32837
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06/10/04-80001-001 550.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Saulo Lacerda*

06/04/04 (407) 832-4