FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

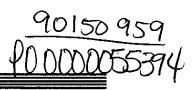
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Aug 18, 2003 8:00 am Secretary of State 08-18-2003 90165 040 ***150.00

| INTEGRATED ROOFING SYSTEMS | | | | | | |
|---|--|---|----------------|--|-------------|--|
| DO NOT WRITE IN THIS SPACE | | | | | | 90150959 |
| 2. Principal Place of Business 3. Mailing Address 508 SAND WEDGE LOOP PO BOX 10 | | | | | | , |
| Suite, Apt. | | Suite, Apt. #. etc. | | | | DO NOT WRITE IN THIS SPACE |
| City & State APOPKA, FL | | City & State APOPKA, FL | | | 4. FE | Strumber 59-3658015 Applied For Not Applicable |
| Zip 32712 | Country USA | Zip 32704-1018 | Country USA | | | ertificate of Status Desired |
| ر الفتحة () المشتخف المعادلة المرادي () | | | | 7. Name and Address of Current Registered Agent Name MARY JEWELL | | |
| DO NOT WRITE | | | 1 | Street Address (P.O. Box Number is Not Acceptable) | | |
| IN THIS SPACE | | | | 508 SANE | WED(| GE LOOP |
| | | | | City APOP | KA | FL Zip Code 32712 |
| 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 Skipstore, typed or pytied name crystyllered again and tille in applicable. (NOTE: Registered Again signature required when reinstating) DATE | | | | | | |
| January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 9. Election Campaign Financing \$5:00 | | | | | | 9. Election Campaign Financing \$5:00 May Be |
| 10. | OFFICERS A | ND DIRECTORS | TITL | | | |
| TITLE NAME STREET ADDRESS GΠY-ST-ZIP | MARY JEWELL - PRESIDENT 508 SAND WEDGE LOOP APOPKA, FL 32712 | | | E ME EET ADDRESS '-ST-ZIP | · | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | RALPH JEWELL - VICE PRESIDENT 508 SAND WEDGE LOOP APOPKA, FL 32712 | | | E ME EET ADDRESS '-ST-ZIP | | |
| NAME STREET ADDRESS CITY-ST-ZIP | 56 | | | TITLE NAME STREET ADDRESS CITY-ST-ZIP DO NOT WRITE | | |
| TITLE NAME STREET ADDRESS GITY-ST-ZIP | ESS | | | | | IN THIS SPACE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | [[| | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | E BE EET ADDRESS '-ST-ZIP | | |
| 12. Thereby of indicated of the cor | on unis report of subblemental repo | ord is true and accurate and that compowered to execute this re- | for the exe | emption stated in | ര ചെന്നും ക | 9.07(3)(i), Florida Statutes. I further certify that the information gal effect as if made under eath, that I am an officer or director da Statutes; and that my name appears in Block 10 or on an |



P. O. Box 1018, Apopka, FL 32704-1018

Office (407) 889-0695 Fax (407)889-5111

August 07, 2003

Florida Department of State Uniform Business Report P. O. Box 6327 Tallahassee, FL 32314

RE: Uniform Business Report

To Whom It May Concern:

Please accept this \$150.00 check along with our UBR report. We never received the original UBR. We moved in November of 2002 and filed with the post office at that time to forward all mail from the old address. For some reason, we did not receive this.

Sincerely,

Mary D. Dewell

Integrated Roofing Systems, Inc.

Programmed Econfield Foot March 1900 Table greated Econfield Foot March 1900