

**FILED**  
**Apr 11, 2002 8:00 am**  
**Secretary of State**

03-24-2002 90089 025 \*\*\*158.75

**2002 UNIFORM BUSINESS REPORT (UBR)**

**DOCUMENT # P01000019828**

1. Entity Name  
**CARRUTH ENTERPRISES ROOFING, INC.**

Principal Place of Business  
**16115 SW 117TH AVE STE 25  
MIAMI FL 33177**

Mailing Address  
**16115 SW 117TH AVE STE 25  
MIAMI FL 33177**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
**7430 Miami LAKES DR**  
Suite, Apt. #, etc.  
**E 105**

3. Mailing Address  
**PO Box 4607**  
Suite, Apt. #, etc.

City & State  
**Miami LAKES FL**

City & State  
**Mialeah FL**

4. FEI Number  
**65-0801750**

Applied For  
 Not Applicable

Zip  
**33014**

Country  
**USA**

Zip  
**33014**

Country  
**USA**

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**ABERCROMBIE, WRAY  
1615 SW 117TH AVE STE 25  
MIAMI FL 33177**

7. Name and Address of New Registered Agent  
Name **JOHN CARRUTH**  
Street Address (P.O. Box Number is Not Acceptable)  
**7430 MIAMI LAKES DR.  
E 105**  
City **MIAMI LAKES FL** Zip Code **33014**

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.

SIGNATURE *John C. Carruth, Jr.*  
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.   
(See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE <b>D</b>	<input checked="" type="checkbox"/> Delete <b>AMBERCROMBIE, WRAY 16115 SW 117TH AVE STE 25 MIAMI FL 33177</b>	TITLE <b>PRESIDENT</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>JOHN CARRUTH 7430 MIAMI LAKES E105 MIAMI LAKES, FL 33014</b>
TITLE <b>JOHN C. CARRUTH</b>	<input type="checkbox"/> Delete <b>7430 MIAMI LAKES DR E 105 MIAMI LAKES FL 33014</b>	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE <b>PRESIDENT</b>	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

CR2E034 (9/01)

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *John C. Carruth, Jr.*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3-6-02** **305-259-2005**  
Date Daytime Phone #