## 2006 FOR PROFIT CORPORATION

## Mar 13, 2006 08:00 AM DOCUMENT # P01000045182 Secretary of State JANCAR ROOFING, INC. Principal Place of Business Malling Address **450 NORTHMOOR AVENUE NORTH 450 NORTHMOOR AVENUE NORTH** ST. PETERSBURG, FL 33702 ST. PETERSBURG, FL 33702 03062008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3717743 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Recuired 8. Name and Address of Current Registered Agent DENNIE, JANET DO NOT WRITE 450 NORTHMOOR AVENUE NORTH ST. PETERSBURG, FL 33702 IN THIS SPACE 8. The abuve named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fiorida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 期的101466557 Trust Fund Contribution. Added to Fees 03/23/06-80015-006 158.75 10. OFFICERS AND DIRECTORS TILE DENNIE, JANET NAME STREET ADDRESS 450 NORTHMOOR AVENUE NORTH CITY-ST-ZIP ST. PETERSBURG, FL 33702 TITLE NAME DENNIE, ADAM STREET ADDRESS 2843 29TH AVENUE N CTTY-ST-ZP ST. PETERSBURG, FL 33713 TiTLE MAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAVÆ

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or suppliemental 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:

STREET ADDRESS CITY-ST-ZP

DORFRATED NAME OF SIGNING OFFICER OR DIRECTOR

3/2/06

FILED

727-522-238