

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2002 8:00 am
Secretary of State

02-05-2002 90031 028 ***158.75

0375444 AV

DOCUMENT # P01000061813

1. Entity Name
V.J. FLOOD ROOFING, INC.

Principal Place of Business
**783 CORDOVA DR.
 BOCA RATON FL 33432**

Mailing Address
**783 CORDOVA DR.
 BOCA RATON FL 33432**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1121857

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**FLOOD, VALENTINE
 783 CORDOVA DR.
 BOCA RATON FL 33432**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP
**PD
 FLOOD, VALENTINE
 783 CORDOVA DR.
 BOCA RATON FL 33432** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP
**VD
 MULVANY, CHRISTOPHER
 5283 NE 2ND AVENUE
 FT LAUDERDALE FL 33334** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP
☐ Delete

TITLE
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 CITY - ST - ZIP
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP
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☐ Change ☐ Addition

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:

V. Flood

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-20-02 521 3678566

Date

Daytime Phone #

CR2E034 (9/01)