

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2008 8:00 am
Secretary of State

04-30-2008 90176 013 ***150.00

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1. Entity Name

THE UPPER EDGE ROOFING, INC.



Principal Place of Business

1665 W MARTIN LUTHER KING BLVD
RIVIERA BCH, FL 33404

Mailing Address

1556 W 31ST ST
RIVIERA BCH, FL 33404

60033064



DO NOT WRITE IN THIS SPACE

04212008 No Chg-P CR2E034 (11/05)

4. FEI Number

59-3751533

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WILSON, LLOYD
1556 W 31ST ST
RIVIERA BCH, FL 33404

**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

Lloyd Wilson

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/22/08

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	WILSON, LLOYD
STREET ADDRESS	1556 W 31ST STREET
CITY - ST - ZIP	RIVIERA BEACH, FL 33401
TITLE	S
NAME	WILSON, MARY
STREET ADDRESS	1556 W 31ST STREET
CITY - ST - ZIP	RIVIERA BEACH, FL 33401
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 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:

Lloyd Wilson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-22-08 (561) 842-8904

Date

Daytime Phone #