

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10f2



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

DIVISION OF CORPORATIONS

FILED

02 NOV 13 PM 6:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000096145

1. Corporation Name

WEATHER GUARD INDUSTRIAL ROOFING INC.

Principal Place of Business

13105 LEJEUNE RD
MIAMI FL 33054

Mailing Address

13105 LEJEUNE RD
MIAMI FL 33054



2002 YBR

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		10/02/2001	
City & State		City & State		5. FEI Number	
Zip		Country		22-3832429	
				Applied For	
				Not Applicable	
				6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>	
				\$8.75 Additional Fee required for a Certificate of Status	

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1	2	3	4
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	ARSLAN, CHARLES III	2325 LINCOLN AVE	MIAMI FL 33133

800002972418
11/13/02--01069--010 **150.00

8. Name and Address of Current Registered Agent

ARSLAN, CHARLES III
2325 LINCOLN AVE.
MIAMI FL 33133

9. Name and Address of New Registered Agent

Name		
Street Address (P.O. Box Number is Not Acceptable)		
Suite, Apt. #, Etc.		
City	State	Zip Code
	FL	

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of Registered Agent

SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date

11/6/02

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11/6/02

Daytime Phone #

305-986-6474

CR2E040 (8/02)

B

20FZ



November 6, 2002

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

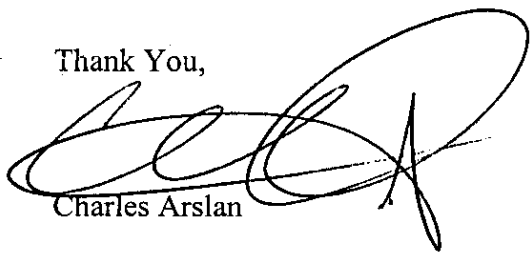
Re: Weather Guard Industrial Roofing Inc
Document # P01000096145

To: Jim Smith, Secretary of State

This letter is to notify you that I did not receive the prior uniform business report (UBR).

I am sending the fee of \$150 along with the application. Please, consider this request to waive the reinstatement fee of \$750. If you have any questions please do not hesitate to call my office. (305) 769-3800

Thank You,



Charles Arslan