## 2007 FOR PROFIT CORPORATION

## Apr 04, 2007 8:00 am Secretary of State **ANNUAL REPORT** DOCUMENT # P02000002152 04-04-2007 90178 035 \*\*\*150 00 1. Entity Name R & T ROOFING, INC. Principal Place of Business Mailing Address 40050039 13810 S.W. 38 ST. 13810 S.W. 38 ST. MIAMI, FL 33175 MIAMI, FL 33175 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03102007 CR2E034 (12/06) Chg-P 4. FEI Number Applied For City & State City & State 59-2242647 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ROMERO, TERESA Street Address (P.O. Box Number is Not Acceptable) 13810 S.W. 38 ST. MIAMI, FL 33175 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. Secretary + TReasurer 4-2-07 (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE 1S \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Addition TITLE Delete TITLE ☐ Change NAME ROMERO, MIGUEL NAME STREET ADDRESS 13810 S.W. 38 ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 33175 ☐ Change ■ Addition TITLE ☐ Delete TITLE ROMERO, TERESA NAME NAME STREET ADDRESS 13810 S.W. 38 ST. STREET ADDRESS MIAMI, FL 33175 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change □ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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.

STREET ADORESS CITY-ST-ZIP

TITLE NAME

Delete

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TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

Teresa Romero SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Addition

☐ Change

**FILED**