FILED
Apr 26, 2004 8:00 am
Secretary of State
04-26-2004 90485 004 ***150.00

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P03000141700

1. Entity Name

IKE'S ROOFING & CONSTRUCTION, INC.

DO NOT WRITE IN THIS SPACE

94066297

2. Principal Place of Business	3. Mailing Address
7528 Cypress Drive	7528 Cypress Drive
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: New Port Richey, FL	City & State: New Port Richey, FL
Zip: 34653 Country: USA	Zip: 34653 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number: 421609791 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: Spiegel & Utrera, P.A.

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

1840 Coral Way, 4th Floor

City: Miami FL Zip Code: 33145

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: _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1 Fee is $150.00
After May 1 Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	John F. Iacovino
STREET ADDRESS	7528 Cypress Drive
CITY-ST-ZIP	New Port Richey, FL 34653
TITLE	S
NAME	Christopher Brosnan
STREET ADDRESS	7528 Cypress Dr.
CITY-ST-ZIP	New Port Richey, FL 34653
TITLE	V
NAME	Anthony P. Iacovino
STREET ADDRESS	7528 Cypress Dr.
CITY-ST-ZIP	New Port Richey, FL 34653

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12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: John F Iacovino 4/22/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

CR2E034B (12/02)