

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000153604

FILED
Oct 20, 2004
Secretary of State

Entity Name: QUALITY ROOFING OF SW FLORIDA, INC.

Current Principal Place of Business:

4340 MOLOKAI DRIVE
NAPLES, FL 34112

New Principal Place of Business:

3510 5TH AVENUE SW
NAPLES, FL 34117

Current Mailing Address:

4340 MOLOKAI DRIVE
NAPLES, FL 34112

New Mailing Address:

3510 5TH AVENUE SW
NAPLES, FL 34117

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALES, JOSEPH
4340 MOLOKAI DRIVE
NAPLES, FL 34112 US

Name and Address of New Registered Agent:

GALES, JOSEPH
3510 5TH AVENUE SW
NAPLES, FL 34117 US

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: JOSEPH GALES

10/20/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GALES, JOSEPH
Address: 4340 MOLOKAI DRIVE
City-St-Zip: NAPLES, FL 34112

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GALES, JOSEPH
Address: 3510 5TH AVENUE SW
City-St-Zip: NAPLES, FL 334117

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH GALES

D

10/20/2004

Electronic Signature of Signing Officer or Director

Date