


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2007 08:00 A
Secretary of State

DOCUMENT # P05000018943 1. Entity Name ALLY ROOFING OF SW FL INC.	
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Principal Place of Business 2021 NE 4TH TERR CAPE CORAL, FL 33909	Mailing Address 2021 NE 4TH TERR CAPE CORAL, FL 33909
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DO NOT WRITE IN THIS SPACE



04112007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-2446503	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

GONZALEZ, ALEXANDER
 2021 NE 4TH TERR
 CAPE CORAL, FL 33909

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GONZALEZ, ALEXANDER 2021 NE 4TH TERR CAPE CORAL, FL 33909
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP VELAZQUEZ, EDWIN R 2607 SW 23TH PL CAPE CORAL, FL 33914
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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04/25/07-80068-020 150.00

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:  Date: 4/11/07 Daytime Phone #: (239) 218-5087

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR