2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000020781

Entity Name: MASTER ROOFING OF SOUTH FLORIDA INC.

FILED Jun 08, 2007 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
	/IRGINIA AVE Y, FL 34990	US			
Current M	ailing Addres	s:	New Mailir	ing Address:	
	/IRGINIA AVE Y, FL 34990	US			
FEI Number:	20-2305362	FEI Number Applied For ()	FEI Number Not Appli	licable () Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
PALM CIT	/IRGINIA AVE Y, FL 34990	US submits this statement for the pu	rpose of changing it	its registered office or registered agent, or both,	
SIGNATUF					
OIOIVATOI		ic Signature of Registered Agen	t	 Date	
Title: Name:	MELDAU, CORII	Delete NA	Title: Name:	NS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition	
Address: City-St-Zip:	3037 SW VIRGI PALM CITY, FL		Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	VP () MELDAU, CORII 3037 SW VIRGI PALM CITY, FL	NIA AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () MELDAU, STEP 3037 SW VIRGI PALM CITY, FL	NIA AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () MELDAU, STEP 3037 SW VIRGI PALM CITY, FL	NIA AVE	Title: Name: Address: City-St-Zip:	T (X) Change () Addition DUARTE, EMILIO PASTOR 1570 SW TOWERING PINES STUART, FL 34997 US	
Title: Name: Address: City-St-Zip:	DIR () MELDAU, STEP 3037 SW VIRGI PALM CITY, FL	NIA AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () MELDAU, CORII 3037 SW VIRGI PALM CITY, FL	NIA AVE	Title: Name: Address: City-St-Zip:	S (X) Change () Addition RAMIRES, JUAN CARLOS 2616 SE BONITA STREET STUART, FL 34997 US	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: STEPHEN D MELDAU PRES 06/08/2007