

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 19, 2007 08:00 AM
Secretary of State

DOCUMENT # P05000090832 1. Entity Name ARK ROOFING AND CONSTRUCTION, INC.	
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Principal Place of Business 1123 PASEO AVENUE FT. PIERCE, FL 34982 US	Mailing Address 1123 PASEO AVENUE FT. PIERCE, FL 34982 US
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03162007 No Chg-P CR2E034 (11/05)

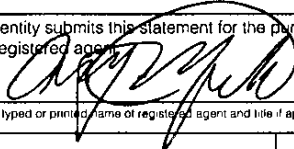
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4. FEI Number 20-3078508	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent PROFETA, ANTHONY V 1123 PASEO AVENUE FT. PIERCE, FL 34982
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**DO NOT WRITE
IN THIS SPACE**

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

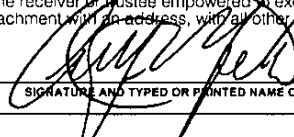
9. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PROFETA, ANTHONY V 1123 PASEO AVENUE FT. PIERCE, FL 34982
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04/30/07-80045-021 150.00

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:  _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #