## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000151037

**FILED** May 05, 2009 Secretary of State

Entity Name: JUAN & SONS ROOFING, INC. **Current Principal Place of Business: New Principal Place of Business:** 19550 NW 57 PLACE HIALEAH, FL 33015 US **Current Mailing Address: New Mailing Address:** 19550 NW 57 PLACE HIALEAH, FL 33015 US FEI Number: 20-3786371 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MACEDO, JUAN E 19550 NW 57 PLACE HIALEAH, FL 33015 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: 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PTSD () Delete Title: (X) Change ( ) Addition MACEDO, JUAN E Name: Name: MACEDO, JUAN E 19550 NW 57 PLACE 19550 NW 57 PLACE Address: Address: City-St-Zip: HIALEAH, FL 33015 US City-St-Zip: HIALEAH, FL 33015 US Title: VD Title: VΡ () Delete (X) Change ( ) Addition MACEDO, RAFAEL E Name: MACEDO, RAFAEL E 19550 NW 57 PLACE 19550 NW 57 PLACE Address:

Name: Address: HIALEAH, FL 33015 US City-St-Zip:

Title: () Delete

Name: Address: City-St-Zip:

HIALEAH, FL 33015 US City-St-Zip:

Title: ( ) Change (X) Addition

Name: MACEDO, MARIA D 19550 NW 57TH PLACE Address: City-St-Zip: HIALEAH, FL 33015 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: JUAN MACEDO PTD 05/05/2009