2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000085070

City-St-Zip:

FT. PIERCE, FL 34987

FILED Jul 20, 2007 Secretary of State

Entity Name: A-1 METAL ROOF FABRICATORS INC.					
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
	ADER CANA E, FL 34987	_ RD.			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	ADER CANA E, FL 34987	_ RD.	2565 SW ABATE ST PT ST LUCIE, FL 3495	3	
FEI Number:	56-2597578	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
NYSTRAND, DOROTHY C 1441 NE 31ST CT. POMPANO BCH, FL 33064 US			2565 SW ABATE ST	CORBISIERO, KEVIN C 2565 SW ABATE ST PT ST LUCIE, FL 34953 US	
The above in the State		submits this statement for the pu	urpose of changing its registered	office or registered agent, or both,	
SIGNATURE: KEVIN C CORBISIERO				07/20/2007	
	Electror	ic Signature of Registered Ager	nt	Date	
		3(2)(b), F.S., the corporation did not g Trust Fund Contribution ().	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () CORBISIERO, 2565 SW ABAT PORT ST. LUC	E ST.	Title: (Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () SMITH, WILLIA 6289 S. HEADE FT. PIERCE, F	ER CANAL RD.	Title: (Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	V () SMITH, SHAWN 6289 S. HEADE		Title: (Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: KEVIN CORBISIERO D 07/20/2007