2008 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # P06000116484 1. Entity Name ARAL ROOFING CORP. Principal Place of Business 820 NE 10TH ST 4 HALLANDALE, FL 33009 US Mailing Address 820 NE 10TH ST 4 HALLANDALE, FL 33009 US DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent

FILED Mar 17, 2008 08:00 A Secretary of State



Г	OO NOT WRITE II	N THIS SPACE	03122008 No Chg-P CR2E034 (11/05)		
	O NOT WHITE II	TITIO OI AOL	4. FEI Number 20-5546596		Applied For Not Applicable
			5. Certificate of Status Desired See Required		
	6. Name and Address of Current Regis	tered Agent			4 () ()
RUCAREANU, ALEXANDRU 820 NE 10TH ST. 4 HALLANDALE, FL 33009			DO NOT WRITE IN THIS SPACE		
	named entity submits this statement for the plans of registered agent.		· · · · · · · · · · · · · · · · · · ·		iliar with, and accept
	Signature, typed or printed name of registered agent and title	if applicable (NOTE Registered Agent sig	nature required when reinstating)	DATE	
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS	7.7		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	P RUCAREANU, ALEXANDRU 820 NE 10TH ST. APT.4 HALLANDALE, FL 33009			000000850112 04/02/08-80048-0 NOT WRITE HIS SPACE	125 150.00
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	<u>-</u>	3	New Assessment		

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

10 0

12/08 954-457-752

Daytime Phone #