2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000039764

Entity Name: UNITED ROOF SYSTEMS, INC

FILED Aug 29, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4630 SOUTH KIRKMAN ROAD 4554 ADA LANE

#768 KISSIMMEE, FL 34746 US ORLANDO, FL 32811 US

Current Mailing Address: New Mailing Address:

PO BOX 421583

KISSIMMEE, FL 34742 US

FEI Number: 20-8753221 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:

GORMAN, PATRICK
4630 SOUTH KIRKMAN ROAD
4554 ADA LANE

#768 KISSIMMEE, FL 34746 US ORLANDO, FL 32811 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: 08/29/2008

Electronic Signature of Registered Agent Date

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: P () Delete Title: P (X) Change () Addition

 Name:
 GORMAN, GENEVIEVE
 Name:
 GORMAN, GENEVIEVE

 Address:
 4630 SOUTH KIRKMAN ROAD #768
 Address:
 4554 ADA LANE

City-St-Zip: ORLANDO, FL 32811 US City-St-Zip: KISSIMMEE, FL 34746 US

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 GORMAN, PATRICK
 Name:
 GORMAN, PATRICK

 Address:
 4630 SOUTH KIRKMAN ROAD #768
 Address:
 4554 ADA LANE

City-St-Zip: ORLANDO, FL 32811 US City-St-Zip: KISSIMMEE, FL 34746 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: GENEVIEVE GORMAN P 08/29/2008