

### COMMERCIAL & RESIDENTIAL ROOFING SPECIALISTS LIC#CCC1330041

Florida Dept of State Division of Corporations PO Box 637 Tallahassee, FL 32314

800381326038

RE: Fraudulent Filing P1200058466

To whom it may concern,

Per my conversation with one of the representatives, I write this letter to inform you of a fraudulent filing on our annual report that was not done by any of the members. We have researched the name and address: both appear to be fake. They exist but do not coincide. I have attached the following items:

- 1) The original email received making us aware a change had been made to our filing.
- 2) Copy of the annual report with the added officer (highlighted the fraudulent name and address used).
- 3) Copy of the annual report after I amended it to remove this individual.
- 4) Copy of the receipt for the filing amendment.

We are not sure of the intentions of the individual whom did this and are very concerned as to what they plan to do with this. Please make note on our record and if there is any means to further secure our information, we request those steps be taken. We also request that you provide payment information used for the false filing so we may provide it to authorities to assist in tracking down the person whom did this. Please feel free to contact me regarding this incident and with any information you can provide.

Sincerely,

Kevin Bass

kbass@myroofsmith.com

813-846-5849

State of: Florida

County of: Hillsborough

The forgoing instrument was acknowledged before me this 28 day of January (who is personally known to me) or (who has produced

as identification), and who (did) (did not) take an oath.

Notary Public State of Florida Christopher M Queen

Notary Signature:

Printed Notary Name: See Stamp

Notary Public Commission Number: See Stamp

# **Kevin Bass**

From:

donotreply@sunbiz.org

Sent:

Thursday, January 27, 2022 1:00 PM

To:

Kevin Bass

Subject:

Division of Corporations - Notice of Change or Filing on P12000058466

## ROOFSMITH OF TAMPA BAY, INC.,

This notice is to make you aware of a recent change or filing on the Florida Department of State, Division of Corporations' records. If you or another authorized person did not make the change or filing, you should review your records at http://www.sunbiz.org/search.html.

False information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, F.S. Our goal is to make you aware of this change or filing so that corrective action may be taken if necessary.

Florida Department of State Division of Corporations 850.245.6000

Item # 1

### 2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000058466

Entity Name: ROOFSMITH OF TAMPA BAY, INC.

**Current Principal Place of Business:** 

6089 JOHNS ROAD STE 9&10

TAMPA, FL 33634

**Current Mailing Address:** 

6089 JOHNS ROAD STE 9&10 TAMPA, FL 33634

FEI Number: 45-5607133

Certificate of Status Desired: Yes

**FILED** Jan 27, 2022

**Secretary of State** 

6987910567CC

Name and Address of Current Registered Agent:

BASS, KEVIN M **6089 JOHNS ROAD STE 9810** TAMPA, FL 33634 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

Officer/Director Detail:

Title

Title

Name

BASS, KEVIN M

Name

QUEEN, CHRISTOPHER M

Address

6089 JOHNS ROAD STE 9&10

Address

6089 JOHNS ROAD STE 9&10

City-State-Zip: TAMPA FL 33634

City-State-Zip: TAMPA FL 33634

Title

**AMBR** 

Name

**BUTLER, STEPHANIE** 

**Address** 

12936 FENNWAY RIDGE DRIVE

City-State-Zip: RIVERVIEW FL 33579

I hereby 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 all other like empowered.

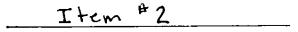
SIGNATURE: KEVIN BASS

**AMBR** 

01/27/2022

Electronic Signature of Signing Officer/Director Detail

Date



### 2022 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P12000058466

Entity Name: ROOFSMITH OF TAMPA BAY, INC.

**Current Principal Place of Business:** 

**6089 JOHNS ROAD STE 9&10** 

**TAMPA FL 33634** 

**Current Mailing Address:** 

6089 JOHNS ROAD STE 9&10 **TAMPA FL 33634** 

FEI Number: 45-5607133

Certificate of Status Desired: No

**FILED** Jan 28, 2022

Secretary of State

8970584972CC

Name and Address of Current Registered Agent:

BASS, KEVIN M 6089 JOHNS ROAD STE 9&10 TAMPA FL 33634 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

Officer/Director Detail:

Title

DΥ

Name

BASS, KEVIN M

Name

QUEEN, CHRISTOPHER M

Address

6089 JOHNS ROAD STE 9&10

Address

6089 JOHNS ROAD STE 9&10

City-State-Zip: TAMPA FL 33634

City-State-Zip:

**TAMPA FL 33634** 

I hereby 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 early, 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 all other like empowered.

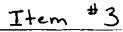
SIGNATURE: KEVIN MICHAEL BASS

**PARTNER** 

01/28/2022

Electronic Signature of Signing Officer/Director Detail

Date



## **Payment Receipt Confirmation**

Your payment was successfully processed.

| Transaction | Summary |
|-------------|---------|
|-------------|---------|

Description

Receipt Confirmation

**Amount** 

\$61.25

· Total Amount Paid

\$61.25

**Customer Information** 

**Customer Name** Local Reference ID Kevin Bass 8970584972CC

P12000058466

**Receipt Date Receipt Time**  1/28/2022

09:26:53 AM EST

**Payment Information** 

**Payment Type Credit Card Type** 

Credit Card **AMEX** 

**Credit Card Number** Order ID

\*\*\*\*\*7000 4531008

**Billing Information** 

**Billing Address** Billing City, State ZIP/Postal Code Country

12425 Gentle Swan Place

Odessa, FL

33556

US

**Phone Number** 

18138465849

This receipt has been emailed to the address below.

**Email Address** 

kbass@gsigc.com