


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 21, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P22548</b>	
1. Entity Name <b>INDUSTRIAL ROOFING SPECIALIST INC</b>	

Principal Place of Business <b>INDUSTRIAL ROOFING SPECIALISTS INC. 134 S. BUMBY AVE. SUITE A ORLANDO, FL 32803</b>	Mailing Address <b>INDUSTRIAL ROOFING SPECIALISTS INC. 134 S. BUMBY AVE. SUITE A ORLANDO, FL 32803</b>
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**DO NOT WRITE IN THIS SPACE**



02202008 No Chg-P CR2E034 (11/05)

4. FEI Number <b>35-1432129</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**FAMULARE, JOHN  
468 WURST ROAD  
OCOE, FL 34761**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *John Famulare* **JOHN FAMULARE, PRESIDENT** **4-18-08**  
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

000000912648  
05/07/08-80088-024 150.00

10. OFFICERS AND DIRECTORS

TITLE <b>P</b>	<b>FAMULARE, JOHN 468 WURST ROAD OCOE, FL 34761</b>
TITLE <b>VP</b>	<b>FAMULARE, KURT 728 GARDEN PLAZA ORLANDO, FL 32803</b>
TITLE <b></b>	<b></b>
TITLE <b></b>	<b></b>
TITLE <b></b>	<b></b>
TITLE <b></b>	<b></b>

**DO NOT WRITE  
IN THIS SPACE**

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: *John Famulare* **JOHN FAMULARE** **2-20-2008** **407-282-1570**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #