2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 06, 2008 8:00 am
Secretary of State
02-06-2008 90029 003 ***158.75

DOCUMENT # P92000014088

1. Entity Name

ROOFING CONCEPTS UNLIMITED/FLORIDA, INC.

Principal Place of Business	Mailing Address
11820 NW 41ST STREET CORAL SPRINGS FL 33065 US	ROOFING CONCEPTS UNLIMITED/FLORIDA, I ~~433 S DIXIE HWY E~~ ~~POMPANO FL 33060~~ US

1st MOORE CR2E034 (10/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
	11820 NW 41st St
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State: Coral Springs FL
Zip / Country	Zip: 33065 / Country: Broward

4. FEI Number: 65-0373955 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
THE SOTO LAW GROUP 2400 E. Commercial STE FORT LAUDERDALE FL 33304	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee Will Be $550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD JACOBAZZI, MICHAEL ~~433 S DIXIE HWY EAST~~ ~~POMPANO BEACH FL~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 11820 NW 41st St Coral Springs FL 33065
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD JACOBAZZI, DENISE A ~~433 S DIXIE HWY E~~ ~~POMPANO BEACH FL 33060~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 11820 NW 41st St Coral Springs FL 33065
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD JACOBAZZI, ANTHONY ~~433 S DIXIE HWY E~~ ~~POMPANO BEACH FL 33060~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 11820 NW 41st St Coral Springs FL 33065
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Manuel A. Jacobazzi 1-28-08 954 786-9350
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #