FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State **DIVISION OF CORPORATIONS**

1996

P93000019230 (0)

DOCUMENT # H & W ROOFING & REMODELING, INC. Principal Place of Business Mailing Address 1730 NW 191ST ST 1730 NW 191ST ST MIAMI FL 33056 MIAMI FL 33056 us 3. Date Incorporated or Qualified 3a. Date of Last Report 03/10/1993 06/01/1995 2. Principal/Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 65-0396374 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trus: Fund Contribution Added to Fees Zio Country 8. This corporation has liability for intangible tax under s 199,032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WILLIAMS, HERMAN L Street Address (P.O. Box Number is Not Acceptable) 82 1730 NW 191 STREET MIAMI FL 33056 83 84 Zip Code City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505. Florida Statutes. Registered Agent signaturu hen reinstaling 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1. 1 TITLE ☐ Change ■ Addition WILLIAMS, HERMAN L NAME 1.2 NAME 1730 N.W. 191 ST. STREET ADDRESS. 1.3 STREET ADDRESS MIAMI FL 33056 1.4 CITY - ST - ZIP DELÉTÉ 11'LE 2 1 TITLE Change Add tion NAME 2 2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-7iP 2 4 CITY - ST - ZIP THE DELETE ___ Change 3. 1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3. STREET AUDRESS C:TY-ST-ZP 34 CITY-ST-ZIP DELETE TITLE ☐ Addition 4 1 TITLE Change NAME 42 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY+ST-ZIF 4.4 CITY-ST-ZIP DELETE THILE 5. 1 TITLE Change ☐ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CHY-S1-7(P 5 4 C(1Y - ST - Z(P THILE □ DELETE 6. 1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6 4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an office or effector of the corporation or the preceding the properties of the corporation of the corporation or the preceding the properties of the corporation of the corporation of the properties of appears in Block 12 og

305-625-6608

CR2E034 (12/95)