

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000028330

Entity Name: ACOMA ROOFING, INC.

FILED
Jan 18, 2005
Secretary of State

Current Principal Place of Business:

1492 OVERCASH DR
DUNEDIN, FL 34698 US

New Principal Place of Business:

Current Mailing Address:

1492 OVERCASH DR
DUNEDIN, FL 34698 US

New Mailing Address:

FEI Number: 59-3176319

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YEI, MAYWA
3319 FOX HILL DR
CLEARWATER, FL 33761 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SQUITIRO, SANTIS M
Address: 1823 EAGLE'S TRACE BLVD
City-St-Zip: PALM HARBOR, FL

Title: VP () Delete
Name: MA'AFU, SIONE
Address: 1621 RIDGE RD
City-St-Zip: LARGO, FL

Title: VP () Delete
Name: SCHWEIKLE, KENNETH
Address: 1552 S. JEFFERSON AVE.
City-St-Zip: CLEARWATER, FL

Title: S () Delete
Name: FETUUHAO, SOSEFO
Address: 732 1/2 NEW YORK ST
City-St-Zip: CLEARWATER, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: SQUITIRO, STEVE C
Address: 4474 ROCKWOOD DR.
City-St-Zip: PALM HARBOR, FL 34685

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SANTIS M. SQUITIRO

P

01/18/2005

Electronic Signature of Signing Officer or Director

Date