FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

CITY - ST - ZIP



FLORIDA DEPARTMENT OF STATE

FILED

May 26 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P93000058386 (2) DOCUMENT #

TOUGH ROOFING COMPANY INCORPORATED

Mading Address Principal Place of Business 20501 NW 24 CT 20501 NW 24 CT MIAMI FL 33058 MIAMI FL 33056 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/16/1993 Applied For 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0427899 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible Yes 24 30 Personal Property Tax due June 30. 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WALKER, JEFFERS 20501 NW 24 CT Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33056** 83 84 Zip Code 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. I hereby accept the appointment as registered agent. I am [apriliar with and accept the obligation of Section 607.0505, Florida Statutes. **SIGNATURE** ni and litic it applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. Addition Change DELETE 1.1 TITLE TITLE WALKER, JEFFERS 1.2 NAME NAME 20501 NW 24 CT STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33056 1.4 CITY - ST - ZIP CITY-ST-ZIP Addition DELETE Change TITLE 2.1 TITLE WALKER, THOMAS NAME **2.2 NAME** 20430 N.W. 24TH CT. STREET ADDRESS 2.3 STREET ADDRESS MIAM! FL 2. 4 CITY - \$1 - ZIP CITY-ST-ZIP X DELETE ☐ Change Addition 3.1 TO LE TITLE BAKER, ROBERT NAME 3.2 NAME 1191/2 N.W. 11TH TERR. STREET ADDRESS 3.3 STREET ADDRESS MIAM! FL CITY-ST-ZIP 3.4. CITY - ST-ZIP Change Addition DELETE 4.1 TITLE TITLE SAINTODE, VILMA NAME 4. 2 NAME 55 N.W. 56TH ST., #5 4.3 STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP 4.4 CITY - ST - ZIP Change ___ Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST-ZIP CITY-ST-ZIP DELETE Change Addition 6.1 TITLE T!TLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

11/2/108

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 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 12 or Block 13 if changed, or on an attachment with an address.