

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 AUG-8 AM 4:19

DOCUMENT # P93000074800 (2)

1. Corporation Name

A AAPEX ROOFING INC.

Principal Place of Business

Mailing Address

7601 E. TREASURE DR.
P-206
N. BAY VILLAGE FL 33141
US

7601 E. TREASURE DR.
P-206
N. BAY VILLAGE FL 33141
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

10/21/1993

3a. Date of Last Report

08/08/1994

4. FBI Number

65-0451863

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

7. This corporation has liability for intangible tax under s. 199 (1)(2)

Florida Statutes

☒ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21 110 N.W. 1ST STREET

26 7601 E. TREASURE DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 SUITE 3

27 P-206

City & State

City & State

23 DANIA, FL 33004

28 NORTH BAY VILLAGE, FL

Zip

Country

Zip

Country

24 33004

25 USA

29 33141

30 DADE

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PAULSON, DAVID A
7601 E. TREASURE DR.
P-206
N. BAY VILLAGE FL 33141

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and date of application

(NOTE: Registered Agent signature required when reappointing)

DATE

DAVID A. PAULSON

7/31/95 (305) 865 1606

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME PAULSON, DAVID A
STREET ADDRESS 7601 E. TREASURE DR., P-206
CITY - ST - ZIP N. BAY VILLAGE FL

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

☐ Change

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TITLE
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31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

☐ Change

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STREET ADDRESS
CITY - ST - ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

☐ Change

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TITLE
NAME
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CITY - ST - ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

☐ Change

☐ Addition

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 officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 807, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAVID A. PAULSON

7/31/95 (305) 865 1606