2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P9400001098

1. Entity Name

E & J ROOFING SERVICES, INC.



Principal Place of Business

Mailing Address

DO NOT WRITE IN THIS SPACE

1271 NW 32ND AVE.

FORT LAUDERDALE, FL 33311 US

1271 NW 32ND AVE.

FORT LAUDERDALE, FL 33311

01152004

No Chg-P

CR2E034 (10/03)

FILED Jan 23, 2004 8:00 am

Secretary of State

01-23-2004 90033 002 ***150.00

4. FEI Number 65-0465142 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Daytime Phone #

6. Name and Address of Current Registered Agent

KURLAND, JACKQUELINE I 9105 TAFT STREET PEMBROKE PINES, FL 33024

SIGNATURE:

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the prions of registered agent.	urpose of changing its registered	office or re	egistered agent, or bot	th, in the State of Florida. I am familiar with, and ac	cept
SIGNATURE_	Signature, typed or printed name of registered agent and title if	applicable (NOTE: Registered	Agent signature	required when reinstating)	DATE	-
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		Election Campaign Financ Trust Fund Contribution.	eing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS			-	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROUNTREE, E J 1271 N.W. 32ND AVENUE FORT LAUDERDALE, FL 33311					
NAME STREET ADDRESS CITY-ST-ZIP	D ROUNTREE, ESSIE 1271 N.W. 32ND AVENUE FORT LAUDERDALE, FL 33311				•	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		,	•	DO	NOT WRITE	
TITLE NAME STREET ADDRESS			7.	IN ⁻	THIS SPACE	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP				, ,		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			,		mage 、 min	, <u>-</u> -
12. I hereby 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 report or supplemental teport 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 his 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 a other like empowered.						