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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

P9400007343 (4)

DOCUMENT # P9400007343 (4) 1. Corporation Name BRYANT ROOFING, INC.					
Principa! Place o	of Business	Mailing Address		i 1081(00) til talli dibit poru gojii	AP IRE AND IN INCOME COME AND AND CONTRACT OF THE CONTRACT OF
EATO HELDIGITE OIL		2326 KEYSTONE DR. ORLANDO FL 32806			
				01/31/1994	Date of Last Report 04/04/1995
2. Principal Plac	ce of Business	2a. Mailing Address 26		4. FEI Number 59-3221108	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State:		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23 Zip	Country	Zip	Country	This corporation has liability for intanging Florida Statutes	ble tax under s 199.032,
24	9. Name and Address of Curre	nt Registered Agent	30	10. Name and Address of New Registe	
	9, 1141110 4110 11401000 01		81 Name		
BRYANT, DANIEL M 2326 KEYSTONE DR. ORLANDO FL 32806			82 Street Add	82 Street Address (P.O. Box Number is Not Acceptable)	
			83		
_			84 City		FL 85 Zip Code
or registere familiar with SIGNATURE	ed agent, or both, in the State of Flor h, and accept the obligations of, Sec Signature, typed or printed name of registered age	rida. Such change was authorize etion 607.0505, Florida Statutes	an by the comporation's boa	ration submits this statement for the purpose and of directors. I hereby accept the appointment of the purpose and the appointment of the purpose and the appointment of the appointment	ATE
112.	P	DELETE	1 1 TITLE	7.25111.01.01.01.01.01	Change Addition
NAME	BRYANT, DANIEL M		1.2 NAME		
STREET ADDRESS	2326 KEYSTONE DR		1.3 STREET ADDRESS		
CHY-ST-ZIP	ORLANDO FL		1.4 CITY - ST - ZIP		ET Observe ET Addition
TITLE	ST	DETEATE.	2 1 TITLE		Change
NAME	BRYANT, SANDRA		2.2 NAME		
STHEFT ADDRESS	2326 KEYSTONE DR ORLANDO FL		2 3 STREET ADDRESS		
CHTY - ST - ZIP	UKLANDO FL	☐ DELETE	2 4 CITY - ST - ZIP 3 1 TITLE		☐ Change ☐ Addition
TITLE NAME		D beene	3.2 NAME		_
STREET ADDRESS			33 STREET ADDRESS	100001799	771
City-SI-7iP			3.4 CITY - ST - ZIP	1 0000 1 795 -04/26/9601027	013
TITLE		DELE TE	4. 1 TITLE	***200.00	Change Addition
NAME			4.2 NAME		
STREET ADORESS			4 3 STREET ADDRESS		
CITY - ST - ZIP		Pro Dec Ess	4.4 CITY-ST-ZIP		Change Addition
TITLE		DEFE LE	5. 1 TITLE		☐ Strange ☐ Addition
NAME			5.2 NAME		
STREFT ADDRESS			5.3 STREET ADDRESS		
CHY-S1-ZIP		☐ DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
TITLE		LI Section	62 NAME		d . \mathcal{A}
NAME STREET ADDRESS			6.3 STREET ADORESS		M.V.
CITY-ST-74P			6.4 CITY-ST-ZIP		· W

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Daytime Phone #