## **2003 FOR PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR)

## P94000022680 DOCUMENT #

1. Entity Name COMPLETE ROOFING & MAINTENANCE CORP.



## FILED Jan 10, 2003 8:00 am Secretary of State

01-10-2003 90051 014 \*\*\*150.00

			1					
Principal Pla	ce of Business	Mailing Address						
HOLLYWOOD		5001 MADISON ST						
us	12 00021	HOLLYWOOD FL 33021 US						
		00				1831 <b>- 18</b> 11 - 1181 - 1181 - 1181 - 1181 - 1181 - 1181 - 1181 - 1181 - 1181 - 1181 - 1181 - 1181 - 1181 - 1181 -		
2. Principal Place of Budness 3. Mailing Address 5001 Madison				-				
Suite, Apt. #, etc.  Suite, Apt. #, etc.			130.1 01		CHECK HERE IF MAKING CHANGES			
City & Sta		City & State Hollywood	Fl. 330:	2/4	. FEI Number <b>65-0512679</b>	<del> </del>	oplied For	
330	21 Broward	Zip 737021	Browar	1	. Certificate of Status Desired	S8.75 Add	ditional	ı
6. Name and Address of Current Registered Agent					Name and Address of New Reg	istered Agent		
ROBLEJO, ROLAND R					IA .			
· ,			Street A	Street Address (P.O. Box Number is Not Acceptable)				
5001 MADISON ST								
HOLLYWOOD FL 33021								
ę			City			FL Zip Cod		
8. The above the obligat	named entity submits this statement for tions of registered agent.	the purpose of changing its re	egistered office or	registered a	gent, or both, in the State of Florida	a. I am familiar with,	and accept	
SIGNATURE								
	Signature, typed or printed name of registered agent an	d title if applicable. (NOTE:	Registered Agent signate	ure required when	reinstating)	DATE	<del></del>	
	ILE NOW!!! FEE IS \$150.00			···				
After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State					S. Election Campaign Finance     Trust Fund Contribution.	· _ \\	May Be to Fees	
10.	OFFICERS AND D	IRECTORS .	11.	Α	DDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS	S IN 11	
TITLE NAME	PD ROBLEJO, ROLANO R	☐ Delete	TITLE		· · · · · · · · · · · · · · · · · · ·	Change		ଚ
STREET ADDRESS	900 N.E. 179 TERRACE		NAME					9
CITY-ST-ZIP	N. MIAMI BCH FL		STREET ADDRESS					ᄶ
TITLE	DOS		CITY-ST-ZIP	<del></del> .	- <del></del>			CR2E034 (10/02)
	RIVERA, CARLOS	☐ Delete	TITLE	111. 1	- 54 20	Change	Addition	쏤
	770 W. 75 ST		STREET ADDRESS	401	3 10 32 4	ve.	1	_
CITY-ST-ZIP	HIALEAH FL 33014		CITY-ST-ZIP	Ft.	5 SW 32 A Lauderdale FL.	33712	1	
	PS	☐ Delete	TITLE				□ Addition	
NAME	GONSALEZ, LAZARO		NAME -	3/7	1N-W 174	S/ Lear Griange	☐ Addition	

CITY-ST-ZIP 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. 954-322-0710

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

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NAME

☐ Delete

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☐ Delete

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIF

CITY-ST-ZIF

TITLE

NAME

TITLE

NAME

TITLE

NAME

3619 SW 16 ST

MIAMI FL 33145

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Addition

Addition

Addition

☐ Change

☐ Change

☐ Change