

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000044105 (2)

1. Corporation Name

HANDYMAN ROOFING, INC.



Principal Place of Business

11327 - 43 STREET NORTH
CLEARWATER FL 34622

Mailing Address

11327 - 43 STREET NORTH
CLEARWATER FL 34622

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

06/09/1994

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0571970

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name

Angelo D. Salvatore

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

11327 43rd St. N

83

84 City

Clearwater

FL

85 Zip Code

34622

11. Pursuant to the provisions of Sections 607.1402 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, 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 of Registered Agent

(NOTE: Registered Agent signature required after 5/1/95)

Date

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
DISALVATORE, ANGELO J
STREET ADDRESS
11327-43 STREET NORTH
CITY-ST-ZIP
CLEARWATER FL

TITLE ☐ DELETE

NAME
VP
MARCIANO, FRANKLIN A
STREET ADDRESS
11327-43 STREET NORTH
CITY-ST-ZIP
CLEARWATER FL

TITLE ☐ DELETE

NAME
SR FABRIZI, RICHARD J
STREET ADDRESS
11327 43 STREET N
CITY-ST-ZIP
CLEARWATER FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

71 TITLE

72 NAME

73 STREET ADDRESS

74 CITY-ST-ZIP

81 TITLE

82 NAME

83 STREET ADDRESS

84 CITY-ST-ZIP

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 for an attachment with an address.

SIGNATURE:

Signature and Title or Printed Name of Signing Officer or Director

Angelo D. Salvatore (813) 577-2468

Date

Signature/Printed Name

SG 11-27-96

CR2E034 (12/95)