

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Jun 24 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000049012(CS)

1. Corporation Name

AFFORDABLE ROOF TECHNICIANS, INC.

Principal Place of Business

Mailing Address

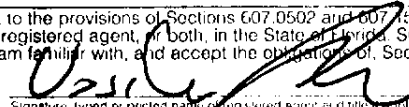
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21	1108 NE 4TH COURT	26	1108 NE 4TH COURT	6/27/94	11/7/97
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	Applied For
22		27		65-0503523	Not Applicable
City & State		City & State		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23 HALLANDALE FL		28 HALLANDALE FL		☐	\$5.00 May Be Added to Fees
Zip		Zip		6. Election Campaign Financing Trust Fund Contribution	☐
24 33009	Country	29 33009	Country	7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	☒ Yes ☐ No
25 BROWARD		30 BROWARD			

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81	Name	VASILE MALINETSCU
82	Street Address (P.O. Box Number is Not Acceptable)	1108 NE 4TH COURT
83		
84	City	HALLANDALE FL
85	Zip Code	33009

11. Pursuant to the provisions of Sections 607.0502 and 607.0508, 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  VASILE MALINETSCU PRESIDENT 954 456 0217

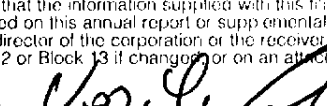
Signature typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature required when installing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRESIDENT ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	VASILE MALINETSCU	1.2 NAME	
STREET ADDRESS	1108 NE 4TH COURT	1.3 STREET ADDRESS	
CITY-ST-ZIP	HALLANDALE, FL 33009	1.4 CITY-ST-ZIP	
TITLE	VICE PRESIDENT ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	ION MALINETSCU	2.2 NAME	
STREET ADDRESS	908 MOFFETT ST.	2.3 STREET ADDRESS	
CITY-ST-ZIP	HALLANDALE, FL 33009	2.4 CITY-ST-ZIP	
TITLE	VICE PRESIDENT ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	DUMTRU MALINETSCU	3.2 NAME	
STREET ADDRESS	1117 NE 2ND COURT	3.3 STREET ADDRESS	
CITY-ST-ZIP	HALLANDALE, FL 33009	3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 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: 

JUNE 18, 1997 954 456 0217

CR2E034 (9/96)