2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000055713

Entity Name: ROOFTOP CLEANUP CREW INC.

4878 NW TUCKET LANE

ORLANDO, FL 32808

Address: City-St-Zip: FILED Apr 20, 2009 Secretary of State

| Littly Na | ille. ROOFT | OF CLEANOF CREW, INC. | | | |
|---|--|----------------------------------|---|--|--|
| Current Principal Place of Business: | | | New Principal Place of | New Principal Place of Business: | |
| 5803 NOR ORLANDO | TH LANE D, FL 32808 | | | | |
| Current Mailing Address: | | | New Mailing Address | New Mailing Address: | |
| PO BOX 6 ORLANDO | 17392), FL 32861 | | | | |
| FEI Number | : 65-0509282 | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and | l Address of | Current Registered Agent: | Name and Address of | Name and Address of New Registered Agent: | |
| 5803 N LA | ALBERTO D .NE), FL 32808 | US | | | |
| | named entity e of Florida. | submits this statement for the p | purpose of changing its registered | office or registered agent, or both, | |
| SIGNATUI | RE: | | | | |
| Electronic Signature of Registered Agent | | | ent | Date | |
| Election Car | mpaign Financi | ng Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | P (SHELLS, ALE PO BOX 6173 ORLANDO, F | 392 | Title: Name: Address: City-St-Zip: | ()Change ()Addition | |
| Title: Name: Address: City-St-Zip: | VP (MADISON, W 608 INDIAN S ORLANDO, F | Т | Title: Name: Address: City-St-Zip: | ()Change ()Addition | |
| Title: Name: | VP (PEREZ, YOR |) Delete EIQUA | Title: Name: | () Change () Addition | |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: ALBERTO SHELLS DIRE 04/20/2009