

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

FILED
Jun 04 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra S. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000007788 (9)

1. Corporation Name

Waterproofing Systems & Roofing Corp.

Principal Place of Business

Mailing Address

8550 W. Flagler St. Suite 104
Miami, Fl. 33144

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
01/30/1995

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

Applied For

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

65-0595981

Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

23 Zip

Country

28 Zip

Country

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

24

25

29

30

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PENA, BERNABE
8550 W. Flagler St.
Suite 104
Miami, Florida 33144

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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

Signature of person making change (must be officer, director, or authorized agent)

(NOTE: Registered Agent's signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME Director
Pena, Bernabe
STREET ADDRESS 4700 Sunset Drive
CITY-STATE-ZIP Miami, Florida 33143

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition
12 NAME
13 STREET ADDRESS
14 CITY-STATE-ZIP

15 TITLE ☐ Change ☐ Addition
16 NAME
17 STREET ADDRESS
18 CITY-STATE-ZIP

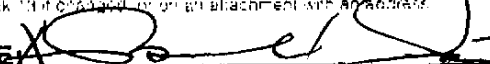
19 TITLE ☐ Change ☐ Addition
20 NAME
21 STREET ADDRESS
22 CITY-STATE-ZIP

23 TITLE ☐ Change ☐ Addition
24 NAME
25 STREET ADDRESS
26 CITY-STATE-ZIP

27 TITLE ☐ Change ☐ Addition
28 NAME
29 STREET ADDRESS
30 CITY-STATE-ZIP

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY-STATE-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(d), 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. I am an
officer or director of the corporation or the incorporator 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  Bernabe Pena

5/26/1998

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