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

**PROFIT** CORPORATION ANNUAL REPORT 1998

STREET ADDRESS



ELORIDA DEPARTMENT DE STATE

**FILED** 

May 11 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P95000057573 (4)

ROOF RENEW OF NORTHEAST FLA. INC. Principal Place of Business Mailing Address 2330 TORBAY DRIVE 2330 TORBAY DRIVE ORANGE PARK FL 32073 **ORANGE PARK FL 32073** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/21/1995 2. Principal Place of Business 2a. Mailing Address Applied For 59-3334966 21 26 Not Applicable Suite, Apt #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes Yes 24 30 Personal Property Tax due June 30. 29 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 JOHNSON, RETIA M 2330 TORBAY DRIVE 62 **ORANGE PARK FL 32073** 32073 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 agont, 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 are familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.

SIGNATURE

Output

1. 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 agont, 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 are familiar with any large transfer of the purpose of changing its registered office or registered agont, 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 are familiar with any large transfer of the purpose of changing its registered of the purpose of changing its registered agent. I are familiar with a purpose of changing its registered agent. I are familiar with a purpose of changing its registered agent. I are familiar with a purpose of changing its registered agent. I are familiar with a purpose of changing its registered agent. I are familiar with a purpose of changing its registered agent. I are familiar with a purpose of changing its registered agent. I are familiar with a purpose of changing its registered agent. I are familiar with a purpose of changing its registered agent. I are familiar with a purpose of changing its registered agent. I are familiar with a purpose of changing its registered agent. I are familiar with a purpose of changing its registered agent. I are familiar with a purpose of changing its registered agent. I are familiar with a purpose of changing its registered a d and title if applicable when reinstating) CR2E034 (10/97 12. ICERS AND DIRECTORS resident ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Addition ☐ Change TITLE 1.1 TITLE JOHNSON, RETIA M JASON NAME 1.2 NAME 2330 TORBAY DU 2330 TORBAY DRIVE STREET ADDRESS 1.3 STREET ADDRESS 32013 **ORANGE PARK FL** CITY-S1-ZIP 1.4 CITY - ST - ZIP DELETE 21 TITLE Change Addition 2.2 NAME STREET ADDRESS 2 3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3 1 TITLE 3.2 NAME NAME 3 3 STREET ADORESS STREET ADDRESS CITY-ST-ZIP 3 4. CITY-ST-ZIP Change DELETE Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP Change TITLE DELETE Addition 6.1 TITLE 62 NAME NAME

Thereby 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 occipied port 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: Som Kook

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP