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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999 DOCUMENT # P95000057703

M. ROMERO'S ROOFING & INSPECTIONS, INC.

Principal Plac	ce of Business	Mailing Addres	55						
13360 SW 78 ST 13360 SW 78 ST MIAMI FL 33183 MIAMI FL 33183									
			3			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed		0017102	
						07/26/1995			
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		I A	pplied For
21	200 01 2 2011000	26				65-0596087			ot Applicable
Suite, Apt.	. #. etc.	Suite, Apt.	#, etc.						Additional
22	• • • • • • • • • • • • • • • • • • • •	27				5. Certificate of Status Desired			equired
City & State City & State			te	-		6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution			to Fees
Zip	Country	Zip		Country	<u>-</u>	8. This corporation owes the curr	ent year i	ntangible	
24	25	29	30			Personal Property Tax.		☐ Yes	□No
	9. Name and Address of Curre	ent Registered Agen	t			10. Name and Address of New F	legistere	d Agent	
P.01	TOO MADIA		•	81	Name				
ROMERO, MARIA 13360 SW 78 ST				82	Street Ad	dress (P.O. Box Number is Not Accepta	ble)		
				<u> </u>					
MIA	MI FL 33183			83	J				
				84	City			85 Zip	Code
	-						F	L `	
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Flo	orida Statutes, t	ne abov	e-named co	rporation submits this statement for the	purpose o	of changing it	s registered
office or	registered agent, or both, in the State am familiar with, and accept the oblig	e of Florida. Such cha ations of. Section 60	ange was autho 7.0505. Florida	rized by Statutes	the corpora	tion's board of directors. I hereby accep	t the app	ointment as i	egistered
-		,							
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable.	(NOTE: Regi	stered Ager	nt signature requ	ired when reinstating)	DATE		
12.	OFFICERS A	ND DIRECTORS		13.		ADDITIONS/CHANGES TO OF	ICERS A		
TITLE	PD		DELETE	1,1 TITLE				Change	☐ Addition
NAME	ROMERO, ONEIDA		ſ	1.2 NAME	1				
STREET ADDRESS	3211 S.W. 128TH AVE.			1.3 STREE	FADDRESS				
CITY-ST-ZIP	MIAMI FL 33175			1.4 CITY-S	T-ZIP				
TITLE	TD		DELETE	2.1 TITLE				Change	Addition
NAME	ROMERO, MARIA		ſ	2.2 NAME	ĺ				
STREET ADORESS				2.3 STREE	TADDRESS				
CITY-ST-ZIP	MIAMI FL 33183			2. 4 CITY-5	ST-ZIP				
TITLE	SD			3.1 TITLE				Change	Addition
NAME	ROMERO, MARCOS		l	3.2 NAME	İ				
STREET ADDRESS					TADDRESS				
CITY-ST-ZIP	MIAMI FL 33183			3.4. CITY-5					
TITLE	INIPANI 1 E 00 100			4,1 TITLE	71-21F			☐ Change	☐ Addition
NAME	1	٥	1	4. 2 NAME	1			_ •	_
1					T ADDRESS				
STREET ADORESS	P 			4.3 SINCE 4.4 CITY-S					
CITY-ST-ZIP				4.4 CHY-S 5.1 TITLE	IVZIP			☐ Change	Addition
TITLE	Į.	U		5.2 NAME	}				
NAME					T ADDRESS				
STREET ADDRESS	\$(3.3 3 I KEE	MUKESS				
t	1								
CITY-ST-ZIP TITLE				5.4 CITY-S 6.1 TITLE	T-ZIP			Change	Addition

14. I 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, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

FILED Apr 25, 1999 8:00 am Secretary of State

04-25-1999 90050 021 ***150.00