

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 05, 1999 8:00 am
Secretary of State

05-05-1999 90140 029 ***150.00

DOCUMENT # P95000077793

1. Corporation Name

PREMIER TILE ROOFING OF CENTRAL FLORIDA, INC.

Principal Place of Business

8712 E. CRESCO LANE
INVERNESS FL 34452

Mailing Address

P.O. BOX 670
INVERNESS FL 34453

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/06/1995

4. FEI Number

65-0612105

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐

Yes ☐ No

2. Principal Place of Business

21 3221 E. THOMAS ST

Suite, Apt. #, etc.

22 Suite #1

City & State

23 INVERNESS, FL.

Zip

24 34453

Country

25 U.S.A.

2a. Mailing Address

26 Suite, Apt. #, etc.

City & State

27

City & State

28

Zip

29

Country

30

9. Name and Address of Current Registered Agent

SUGGS, DANNY
3221 E THOMAS ST
INVERNESS FL 34453

10. Name and Address of New Registered Agent

81 Name

LOPEZ, ALLAN JESUS

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

6507 N. ADRIANA AVE.

83

84 City

TAMPA, FL.

FL

85 Zip Code

33604

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

Allen Lopez
Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

4-30-99

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☒ DELETE

NAME SUGGS, DANNY
STREET ADDRESS 3221 E THOMAS ST
CITY-ST-ZIP INVERNESS FL 34453

TITLE VP ☐ DELETE

NAME LOPEZ, ALLAN JESUS
STREET ADDRESS 3507 ARLINGTON AVE
CITY-ST-ZIP TAMPA FL 33607

TITLE VP ☒ DELETE

NAME GOMEZ, MARCO JULIO
STREET ADDRESS 3507 ARLINGTON AVENUE
CITY-ST-ZIP TAMPA FL 33607

TITLE VP ☒ DELETE

NAME GOMEZ, MARCELINO
STREET ADDRESS 3507 ARLINGTON AVENUE
CITY-ST-ZIP TAMPA FL 33607

TITLE ST ☒ DELETE

NAME SUGGS, GARY
STREET ADDRESS 8712 E. CRESCO LANE
CITY-ST-ZIP INVERNESS FL 34452

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VP ☐ Change ☒ Addition

1.2 NAME GALLEGO, JUAN
1.3 STREET ADDRESS 3902 EXPENCE AVE.
1.4 CITY-ST-ZIP TAMPA, FL. 33604

2.1 TITLE P/S/T ☒ Change ☐ Addition

2.2 NAME LOPEZ, ALLAN JESUS
2.3 STREET ADDRESS 6507 N. ADRIANA AVE.
2.4 CITY-ST-ZIP TAMPA, FL. 33604

3.1 TITLE VP ☐ Change ☒ Addition

3.2 NAME ORTEGA, LUIS
3.3 STREET ADDRESS 3507 N. ARLINGTON AVE.
3.4 CITY-ST-ZIP TAMPA, FL. 33604

4.1 TITLE VP ☐ Change ☒ Addition

4.2 NAME TORONDO, GORGE
4.3 STREET ADDRESS 1012 1/2 HOLMES AVE.
4.4 CITY-ST-ZIP TAMPA, FL. 33604

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

SIGNATURE:

Allen Lopez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-99 (352) 637-2422

Date

Daytime Phone #

CR2E034 (11/98)

048761