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

PROFIT CORPORATION ANNUAL REPORT

1998



TOTOM DEPARTMENT OF STA

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600053642 (0)

ALMIRA ROOFING, INC.

Principal Place of Business Mailing Address

19853 NW 87TH CT 19853 NW 87TH CT
MIAMI FL 33015 MIAMI FL 33015

FILED
Apr 23 1998 8:00am
Secretary of State



19853 NW 87TH CT MIAMI FL 33015		19853 NW 87TH CT MIAMI FL 33015				
				DO NOT WRITE	IN THIS SPACE	
				3. Date Incorporated or Qualified 06/24/1996		
2. Principal Place of Business	2a. Mailing	Address		4. FEI Number		Applied For
21	26			65-0708026		Not Applicable
Suite, Apt # etc	Suite, A	φt. #, etc.			\$8.7	5 Additional
22	27			5. Certificate of Status Desired	Fee	Required
City & State	City & S	state		6. Election Campaign Financing	\$5.0	OO May Be
23	[28]			Trust Fund Contribution		ed to Fees
Z)pC	ountry Zip	Country Country		8. This corporation owes or has paid the current year Intangible		
24 25	29	30		Personal Property Tax due June 30. Yes No		□ No
9. Name and A	Address of Current Registered Ag	* · · · · · · · · · · · · · · · · · · ·		10. Name and Address of New Reg	istered Agent	
ROBERTS, STEVE	N M	•	Name			
19853 NW 87TH (CT	<u></u>	32 Street Add	dress (P.O. Box Number is Not Acceptable)		
MAMI FL 33015		[0	arese () .e. box Hamber is Net Neseptasi	o,	
		7	33			
		Į.			. 1:-1 -	
		1	City		FL 85 Z	'ip Code
 office or registered agent, or 	r both, in the State of Florida. Such-	change was authorized	by the corpora	rporation submits this statement for the pu ation's board of directors. I hereby accept	rpose of changin	g its registered as registered
agent I am familiar with, and SIGNATURE	d accept the obligations of, Section	607.0505, Florida Statu	tes.			_
	of name of nigestimed pgent and title if appearance	(NOTE Brigistered	Agent signaturo reqi	uired when reinstating)	DATE	
12.	OFFICERS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIRECT	ORS IN 12
TITLE D	· · · · · · · · · · · · · · · · · · ·	DEEF1E 1.1 THTE	F		☐ Chang	ge 🔲 Addition
NAME ROBERTS, S	steven m	1.2 NAN	1 E			
STREET ADDRESS 19653 NW 6	B7TH CT	13 STA	EET ADDRESS			
CITY-ST-ZIP MIAMI FL 33	3015	14 CITY	-ST-ZIP			
TITLE	· · · · · · · · · · · · · · · · · · ·	DELETE 2 1 TITL	F		Chang	ge Addition
NAME		2.2 NAN	16			
STREET ADDRESS		23 SIR	FET ADDRESS			
CITY-ST ZIP		2.4 C/I	Y · ST · ZIP			
TITLE	· · · · · · · · · · · · · · · · · · ·	DELETE 3 1 TITL		·	☐ Chang	e Addition
NAME		3.2 NAN	1E			
STREET ADDRESS		33 STR	EET ADDRESS			
City-St-ZiP			Y - ST - ZIP			
TITLE		DELETE 4 I THE			Chang	ge Addition
NAME		4 2 NAI				
STREET AUDRESS			ET ADDRESS			
City - ST - 7IP			'-ST-ZIP			
TIFLE		DELETE 51 TITU			Chang	e Addition
NAME	_	5.2 NAM	16			=
STREET ADDRESS			ELL ADDRESS			
CITY - ST - 7IP			-SI-ZIP			
TITLE	г	☐ DELETE 61 TITU			Chang	e Add-tion
NAME	L	6.2 NAM				
STREET ADDRESS			ELT ADDRESS			
SINCEL AUUNCSS		■ 035 K	T CADIDRESS I			
City - St - ZiP			'- S1 - ZIP			Ì

14. Thereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report of 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 truster 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, are on an attachytinity in address.

CICMATUDE.

tur white

STEVE ROBERTS PRESIDENT

4.9.98

(305)825.9629