

2006 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 16, 2006 08:00 AM
Secretary of State

DOCUMENT #	P96000076670
1. Entity Name	
RAPID ROOFING INC.	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
550 AVENUE A		8360 WEST FLAGLER STREET	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
206			
City & State		City & State	
KEY LARGO, FL		MIAMI, FL	
Zip	Country	Zip	Country
33037	USA	33144	USA

DO NOT WRITE IN THIS SPACE

4. FEI Number	Applied For
65-0697449	Not Applicable
5. Certificate of Status Desired	\$8.75 Addition- Fee Required
<input type="checkbox"/>	

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent	
Name	
OSCAR CASARIEGO	
Street Address (P.O. Box Number is Not Acceptable)	
550 AVENUE A	
KEY LARGO	
City	Zip Code
FL	33037

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	OSCAR CASARIEGO	550 AVENUE A	KEY LARGO, FL 33037
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	OSCAR CASARIEGO JR.	16152 SW 151 STREET	MIAMI, FL 33196
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP

11.

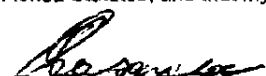
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP

U00000463069
03/25/06-80014-018 150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:



OSCAR CASARIEGO

3-12-06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #