

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 08, 2000 8:00 am
Secretary of State

02-08-2000 90141 039 ***150.00

DOCUMENT # P96000078658

1. Entity Name

CENTURY ROOFING, INC.

Principal Place of Business

Mailing Address

**516 DANVILLE TERRACE
 DAVIE FL 33325**

**13730 SR 84
 STE #176
 DAVIE FL 33325
 US**

00016112

2. Principal Place of Business

3. Mailing Address

14480 SW 16 St

14480 SW 16 St

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Davie, Florida

City & State

Davie, FL

4. FEI Number

65-0696230

Applied For

Not Applicable

Zip

Country

33325

USA

Zip

Country

33325

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**STEELE, BARBARA
 13730 SR 84 176
 DAVIE FL 33325**

Name **Steele Barbara**

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

14480 SW 16 St

City

Davie

FL

Zip Code

33325

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.

SIGNATURE

Barbara Steele President, Barbara Steele

2-1-00

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

(NOTE: Registered Agent signature required when reinstalling)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
 NAME **STEELE, BARBARA**
 STREET ADDRESS **516 DANVILLE TERRACE**
 CITY-ST-ZIP **DAVIE FL 33325**

TITLE **PD** ☒ Change ☐ Delete
 NAME **Steele, Barbara**
 STREET ADDRESS **14480 SW 16 St**
 CITY-ST-ZIP **Davie, FL - 33325**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **Treasurer** ☒ Change ☐ Delete
 NAME **Ricky W. Steele**
 STREET ADDRESS **14480 SW 16 St**
 CITY-ST-ZIP **Davie, FL - 33325**

TITLE ☐ Delete
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Delete
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TITLE ☐ Change ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 11 or Block 12 changed, or on an attachment with an address, with all other like empowerments.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-1-00 954-236-576-1