2003 FOR PROFIT CORPORATION Aug 11, 2003 8:00 am Secretary of State UNIFORM BUSINESS REPORT (UBR) P96000100134 DOCUMENT # 1. Entity Name 08-11-2003 90279 033 ***550.00 GOLD STAR ROOFING, INC. Principal Place of Business Mailing Address 1538 NE 17TH TERRACE 1538 NE 17TH TERRACE FT LAUDERDALE FL 33304 FT LAUDERDALE FL 33304 2. Principal Place of Business 3. Mailing Address 105 115 N ☐ CHECK HERE IF MAKING CHANGES City & State Applied For City & State 4. FEI Number 65-0711804 TLAUDER Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 30<u>c</u> ACL Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BEAMER, WILLIAM D., CHARTERED Street Address (P.O. Box Number is Not Acceptable) 1290 E OAKALAND PARK BLVD. SUITE 107 FORT LAUDERDALE FL 33334-4443 FT. LAUDERDALE ed 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 registered agent. the obligations IOU SIGNATURE FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 П Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Delete TITLE TITI F KANDOLA, BALBIR S NAME NAME 7TH AVE 1115 N. E. 1538 NORTHEAST 17 TERRACE STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33304 CITY-ST-7IP CITY-ST-7IP **VPAS** Change ☐ Addition TITLE ☐ Delete TITLE KAUR. MANJIT NAME STREET ADDRESS 1538 NORTHEAST 17 TERRACE STREET ADDRESS auder dale, fl CITY-ST-ZIP FORT LAUDERDALE FL 33304 CITY-ST-ZIP TITLE TITLE NAME KANDOLA, AMARJIT NAME STREET ADDRESS 1538 NORTHEAST 17 TERRACE STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE FL 33304 CITY-ST-ZIP ATD Delete TITLE Addition MANJIT, KAUR NAME NAME 1538 NORTHEAST 17 TERRACE STREET ADDRESS STREET ADDRESS

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 supplementar 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 Justee empowered to execute this deport as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

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TITLE

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Delete

☐ Delete

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

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FORT LAUDERDALE FL 33304

Change

☐ Addition