SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

1. Corporation Name P97000027078 (9)

FLORIDA MAIN ROOFING, INC.

FILED Oct 01 1998 8:00am Secretary of State



| . | | | | | | | | | |
|---|---|-------------------------------|--------------------|-------------------------------|----------------------------------|---|-------------------|------------------------|---------------|
| Principal Place of Business Mailing Address | | | | | | L TODATODE ISO COLES CORES CORES CONTIL CONTIN | | | |
| 106-SLAKE DRIVE | | 106 S. LAKE DRIVE | | | | | | | |
| LANTANA FL 8 | 19462 | LANTANA FL 33462 | | | DO NOT WRITE IN THIS SPACE | | | | |
| | | | | | | 3. Date incorporated or Qualified | 2 114 17110 | U NOL | ٦ |
| | | | | | | 03/20/1997 | | | |
| 2. Principal F | lace of Business | 2a. Mailing Address | | | | 4. FEI Number | | Applied For | 1 |
| 21 525 | Tudustrial ST | 26 | | | | 65-04420 | 05 | Not Applicable |] |
| Suite, Apt. | #, etc. | Sulte, Apt. #, etc. | | | 5. Certificate of Status Desired | X | \$8.75 Additional | | |
| 22 | | [27] | | | | | | Fee Required | 4 |
| City & Sta | to weath fl | City & State | | | | 6. Election Campaign Financing | | \$5.00 May Be | |
| 23 / /4 | Country | Zip Country | | | | Trust Fund Contribution | ald the sum | Added to Fees | $\frac{1}{2}$ |
| 24 333 | 161 25 USA | 29 30 | | | | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No | | | |
| ···· | 9. Name and Address of Current | rational reservoir or and and | 1001 | Ī | | 10. Name and Address of New R | | | |
| DEN | SON, DANNY LEE | | | 81 | Name | | | | |
| | S. LAKE DRIVE | | | 82 | Street Add | ress (P.O. Box Number is Not Acceptal | nla) | | 4 |
| | TANA FL 33462 | | | <u></u> | Oli Oot Fidoi | Address (P.O. Box Mulliper is Not Acceptable) | | | |
| | | | | 83 | | | | | 1 |
| | | | | 84 | City | | | 85 Zip Code | $\frac{1}{1}$ |
| | | | _ | | • | | FL | | 1 |
| 11. Pursuan | t to the provisions of sections 607.0502 | and 607,1508, Florida Statut | es, the abo | ove-na | med corpo | ration submits this statement for the pur | rpose of ch | anging its registered | |
| agent. I | registered agent, or both, in the State of am familiar with, and accept the obligation | ions of, section 607 0505, F | lorida Stat | utes. | e corporati | on's board of directors. I thereby accept | | itilieni as registered | |
| SIGNATURE | Ignature, typed or printed range of registered agent | lensur | | | <u> </u> | | 9/2 | <u>4</u> 198 | |
| 12. | OFFICERS AND | | 13. | red Ager | t signature requ | ulred when reinstating) ADDITIONS/CHANGES TO OFF | DATE | D DIDECTORS IN 12 | 4 |
| TITLE | President | DELETE | 1.1 1)1 | LE | | ADDITIONS/CHANGES TO OFF | ICERS AN | Change Addition | 1 |
| NAME | | L.J OLLLIL | 1,2 NA | | | | | Change Addition | 1: |
| STREET ADDRESS | Danny Lee Denson 1068. Lake Dr. | | 1.3 STF | | DRESS | | | | H |
| CITY-ST-ZIP | Lantana, FL 33462 | | | Y-ST-ZII | | | | | |
| TITLE | | DELETE | 2.1 TIT | | | | | Change Addition | 1' |
| NAME | | | 2.2 NAM | | | v • | | _ | |
| STREET ADDRESS | | | 2 3 STF | STREET ADDRESS CITY-ST-ZIP | | | | | |
| CITY-ST-ZIP | | | 2.4 CIT | | | | | | |
| TITLE | | DELETE | 3.1 TITLE | | | | [| Change Addition | 1 |
| NAME | | | 3.2 NAME | | | | | | |
| STREET ADDRESS | | | | REET AD | | | | | |
| CITY-ST-ZIP | ······································ | · ··· | | Y-ST-ZIF | | | ···• | | 1 |
| TITLE | | L DELETE | 4.1 111 | | | | l | Change Addition | |
| NAME OTREST ARRESSO | | | 4.2 NAI | | | | | | |
| STREET ADDRESS | | | | REET ADI | | | | | |
| CITY-ST-ZIP TITLE | | Пере | 4.4 C(1 5.1 T/T | Y-ST-ZIF | <u>'</u> | | | 1, 17, | - |
| | | L DELETE | | | | | L | Change Addition | |
| NAME STREET ANDRESS | | | | 2 NAME 3 STREET ADDRESS | | | | | |
| STREET ADDRESS | | | | | | | | | 1 |
| CITY-ST-ZIP TITLE | | DELETE 6.1 TH | | ITY-\$T-ZIP | | | r | Channe Lader | { |
| NAME | | f""] DETELE | 6.2 NA | | | | L | Change Addition | |
| STREET ADDRESS | | | | VIL REET ADI | ORESS | | | | |
| CITY-ST-ZIP | 13 | | | Y-ST-ZIP | - 1 | | | | |
| ## I bearing | 416 44 54 45 4 1 4 4 4 4 4 4 4 4 4 4 4 4 4 | 1-66 | OA CII | 1.01.21 | | 1 - 440 07(0)() Di-14- 0(-) | | | 4 |

I hereby certify that the information supplied with this fiting 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 accurrate 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.