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

Mailing Address

106 S. LAKE DRIVE LANTANA FL 33462

**PROFIT** CORPORATION ANNUAL REPORT

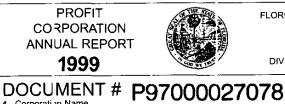
1999

Principal Place of Business 525 INDUSTRIAL ST

LAKE WORTH FL 33461

US

FLORIDA MAIN ROOFING, INC.



FLORIDA DEPAF:TMENT OF STATE

DIVISION OF CORPORATIONS

## Katherine Harris Secretary of State

## Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90006 023 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

03/20/1997

2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Nur iber		A	pplied For	1	
21		26			65-07-42005		N	ot Applicable			
Suite, Ap	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 Additional Fee Required			
City & State	e	City & State				6. Election Campaign Financing S5.00 May Trust Fund Contribution Added to Fer			•		
Zip	County	Zip	Count	trv		8. This corporation owes the curre	ent vear li	ntangible		ĺ	
24	25 29 30		_			Personal Property Tax.		Yes	[]No		
	9. Name and Address of Current	Registered Agent				10. Name and Address of New R	egistere	Agent			
106	SON, DANNY LEE S. LAKE DRIVE FANA FL 33462		8	B1 B2 B3	Street Addre	ess (P.O. Box Number is Not Accepta	ble)				
				84	City		F	<b>_</b>	Code		
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligation	t Florida. Such change was au	ithorized t	by ti	named colpo he corpora io	oration submits this statement for the on's board of directors. I hereby accept	purpose ( If the app	f changing it pintment as r	s registered egistered		
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered A	gent	signature required	d when reinstating)	DATE			<u> </u>	
12.	OFFICERS AND	DIRECTORS	13.			ADDITIC NS/CHANGES TO OF	FICERS #	ND DIRECT	OFS IN 12	<u>)</u> 86	
TITLE	P	☐ DELETE	1.1 TITL	E.				☐ Change	☐ Addition	Ε Ξ	
NAME	DENSON, DANNY LEE ,		1,2 NAME							🕱	
STREET ADDRESS	106 S LAKE DR		1.3 STR	EET /	ADDRESS					CR2E034 (11/98)	
CITY-ST-ZIP	LANTANA FL 33461		1.4 CITY							🔯	
TITLE	E a tripa of the object	DELETE	2.1 TITL			<u></u>		Change	☐ Addition	5	
NAME			2.2 NAM		1					1	
STREET ADORESS			2.3 STREET ADDRESS		ADDRESS .						
CITY-ST-ZIP			2 4 CIT								
TITLE		DELETE	3.1 TITL					Change	Addition		
NAME			3.2 NAM	ΛE							
STREET ADDRESS			3.3 STR	EET	ADDRESS					1	
CITY-ST-ZIP			3.4. CIT	Y-ST	I-ZIP						
TITLE		☐ DELETE	4.1 TITL	£				Change	☐ Addition		
NAME		_	4. 2 NAN	ME							
STREET ADDRE :S			4.3 STR	EET	ADDRESS						
CITY-ST-ZIP			4.4 CITY	/- ST-	-ZIP						
TITLE		☐ DELETE	5.1 TITL	.E				Change	☐ Addition		
NAME			52 NAM	Æ							
STREET ADDRE 3S			5.3 STR	EET/	ADDRESS						
CITY-ST-ZIP			5.4 CITY	Y-ST	-ZIP						
TITLE		☐ DELETE	6.1 TITL	.E			-	☐ Change	☐ Addition		
NAME			6.2 NAM	Æ							
STREET ADDRESS			6.3 STR	EET	ADDRESS						

14. Thereby 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 annual report or 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 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 attact ment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

561 586 8605