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

FILED Feb 26 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P97000043929 (3) LLOYD'S ROOFING, INC. Principal Place of Business Mailing Address 1171 NW 139 STREET 1171 NW 139 STREET MIAMI FL 33168 MIAMI FL 33168 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/19/1997 2. Principal Place of Business 2a. Mailing Address Applied For 21 Not Applicable Suite, Apt #, etc Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Ζip Country Zo Country 8. This corporation owes or has paid the current year Intangible Yes ☐ No Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Namo INCORPORATORS PLUS, INC. 1214 N UNIVERSITY DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33322** 83 Zip Code 84 11. Pursuant to the provisions of Sections 607.05.02 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE TITLE 1.13001 Change Addition MIDDLESTEAD, LLOYD 1.2 NAME NAME 1171 NW 139 STREET 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33168** 1.4 CiTY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 21 TITLE TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP ☐ Addition DELETE Change TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 3 4. Cd Y-ST-ZIP DELFTE Change ☐ Addition TITLE 4 1 TI 4.21 NAME 4.3 ST STREET ADDRESS ET ADDRESS CITY-ST-ZIP 4.4 CI -ST-ZIP Change Addition DELETE TITLE 5.1 TI NAME 5.2 NA 16 STREET ADDRESS 5.3 STREET 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 suppliemental 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 13 if classings, or on pit adjustingly with agradiens.

5.4 City - ST- ZIP

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

DELETE

SIGNATUR

CITY-S1-ZIP

STREET ADDRESS

TITLE NAME

2/18/98 305-681-8675 Daysime Prono # 0204805

Addition

Change