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

PROFIT \* CORPORATION ANNUAL REPORT



\*LORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

Principal Place of Business

P97000045749 (3) DOCUMENT #

ROOFING PLUS, INC.

Mailing Address

2214 WEST 74TH STREET SHITE 201

2214 WEST 74TH STREET SHITE 201

**FILED** Apr 07 1998 8:00am Secretary of State



| HALEAH FL 33016                                     |  | HIALEAH FL 33018  |                                |   |  | DO NOT WRITE IN THIS SPACE   |                 |  |
|---|--|---|--------------------------------|---|--|--|-----------------|--|
|   |  |   |                                |   |  | 3. Date Incorporated or Qualified  |                 |  |
|   |  |   |                                |   |  | ,  |                 |  |
| A Driverie of Dr                                    |  | 2a. Mailing Address   |                                |   |  | 05/22/1997   |                 |  |
|   |  |   |                                |   |  |  | ied For         |  |
| 21  |  | 26  |                                |   |  |  | \pplicable      |  |
| Suite, Apt.   | #, <b>9</b> 1C.  | Suite, Apt. #, etc.   | <del></del>                    |   |  | 5. Certificate of Status Desired S8.75 Add   |                 |  |
| 22  |  | 27  |                                |   | Fee Requ                                 |  |                 |  |
| City & State  | City & State   |   |                                |   | 6. Election Campaign Financing \$5.00 M  |  |                 |  |
| 23  |  | 28  | Count                          | •   |  | Trust Fund Contribution 🔀 Added to I   |                 |  |
| Žip   |  |   |                                | πу  |  | 8. This corporation owes or has paid the current year Intan  | _               |  |
| 24  | 25   | 29 30   |                                |   |  | Personal Properly Tax due June 30. Yes 🔣 No  |                 |  |
|   | 9. Name and Address of Curre   | nt Registered Agent   |                                |   |  | 10. Name and Address of New Registered Agent   |                 |  |
| _   | rnandez, elbis   |   | *                              | 31  | Name                                     |  |                 |  |
| 2214 WEST 74TH STREET SUITE 201<br>HIALEAH FL 33016 |  |   |                                | 82 Street Address (P.O. Box Number is Not Acceptable) |  |  |                 |  |
|   |  |   |                                |   |  |  |                 |  |
|   |  |   | L                              | _   |  | The state of the s |                 |  |
|   |  |   | 8                              | 34  | City                                     | FL 85 Zip Co   | de              |  |
| 44 Purcuant t                                       | to the provisions of Sections 607.050  | 2 and 607 1508. Florida State                                 | utes the abo                   | L   | -named corr                              | poration submits this statement for the purpose of changing its r  | egistered       |  |
| agent. I a  | agistered agent, or both, in the State<br>m familiar with, and accept the oblig  | of Florida. Such change was<br>ations of, Section 607.0505, F | s authorized<br>Florida Statul | by<br>tes.  | the corporal                             | ation's board of directors. I hereby accept the appointment as re  | gistered        |  |
| SIGNATURE   | Signature, typed or printed name of registured age   | on and the if applicable INC                                  | 11 Registered A                | Anne  | o' signature remi                        | ired when reinstating) DATE  |                 |  |
| 12.   |  | D DIRECTORS   | 13.                            | -9  | ., ., ., ., ., ., ., ., ., ., ., ., ., . | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  | IN 12           |  |
| TITLE   | PD   | DELETE  | 11100                          | F   |  |  | Addition        |  |
| NAME HERNANDEZ, ELBIS                               |  |   | 1.2 NAME                       |   |  |  |                 |  |
| ANALMENT TATAL OTHER COLUMN ANAL                    |  |   |                                |   |  |  |                 |  |
| STREET ADDRESS                                      | MALEAU EL 2001A  |   |                                | EET ADDRESS   |  |  |                 |  |
| CITY-ST-ZIP   | and the second s | 1.4 CITY  |                                | F- 71P  |  |  |                 |  |
| TITLE   | SD   | ☐ DELETE  | 2.1 TITU                       |   |  | Change   | Addition        |  |
| NAME  | DIALEAU EL 90040   |   |                                | Œ   |  |  |                 |  |
| STREET ADDRESS                                      |  |   |                                | STREET ADDRESS CITY-ST-ZIP                            |  |  |                 |  |
| CITY-ST-ZIP   |  |   |                                |   |  |  |                 |  |
| TITLE   | D DELETE   |   |                                | E   |  | Change   | Addition        |  |
| NAME  | 1 ADDRESS 1900 SW 22ND AVENUE  |   |                                | Œ   |  |  |                 |  |
| STREET ADDRESS                                      |  |   |                                | 3.3 STREET ADDRESS                                    |  |  |                 |  |
| CITY-ST-ZIP   |  |   |                                |   | 71-7HP                                   |  |                 |  |
| TITLE   | DELETE   |   |                                | 4.1 TITLE   |  | Change   | Addition        |  |
| Í   |  | precit  |                                |   |  | Only   |                 |  |
| NAME  |  |   | 4. 2 NAN                       |   |  |  |                 |  |
| STREET ADDRESS                                      |  |   |                                |   | ADDRESS                                  |  |                 |  |
| CITY-ST-ZIP   |  | TT or rec   | 4.4 CITY                       | •   | T-ZIP                                    |  | * al al section |  |
| TIFLE   |  | ☐ DELETE  | 5.1 1110                       |   |  | Change   | Addition        |  |
| NAME  |  |   | 5.2 NAM                        | F   |  | 7  | ? <u>&gt;</u>   |  |
| STREET ADDRESS                                      |  |   | 5.3 STRE                       | EE1 A   | ADDRESS                                  | •  | ĭ               |  |
| CFTY-ST-ZIP   |  |   | 5.4 CITY                       | ′- S1   | 1 - ZIP                                  | onnonovoovno (   | +17             |  |
| TITLE   |  | DELETE  | 6.1 TITLE                      |   |  | -04/08/9801035024 Change T<br>***155.00  | Addition        |  |
| NAME  |  |   | 6.2 NAM                        | ¶E.   |  | ~94/00/30~~91030~~924<br>************************************  |                 |  |
| STREET ADDRESS                                      |  |   |                                |   | ADDRESS                                  | ***105.UU  |                 |  |
|   | •  |   |                                |   |  |  |                 |  |
| CITY-ST-ZIP   | eartify that the information supplied w  | ith this filing does not qualify                              | 6.4 CITY                       |   |  | n Section 119.07(3)(i), Florida Statutes. I further certify that the in  | formation       |  |
| та, глегеру с                                       | errity that the information supplied w   | ana unis aning does not quality                               | TOT IND EXCIT                  | npu   | non stated in                            | r accion i rato (a)(i), nionua atatues, i iuriner certily triat the ili  | withduon        |  |

indicated on this annual report of 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 corport and that my name appears in Block 12 or Block 13 if change, or on an attachment with an address.