

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2003 8:00 am
Secretary of State

04-24-2003 90187 042 ***158.75

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DOCUMENT # P97000054414

1. Entity Name
A.R.I. ROOFING CONTRACTORS, INC.



Principal Place of Business
**13615 S. DIXIE HWY
#114, PMB-383
MIAMI FL 33176
US**

Mailing Address
**13615 S. DIXIE HWY
#114, PMB-383
MIAMI FL 33176
US**



2. Principal Place of Business
16060 S.W. 86 Ave

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State
MIAMI, FL

City & State

4. FEI Number
65-0763459

Applied For
Not Applicable

Zip
33157 Country
USA

Zip Country

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LETHBRIDGE, R P
13615 S. DIXIE HWY #114, PMB-383
SAINT PETERSBURG FL 33716**

Name
DANIEL DEL SOL
Street Address (P.O. Box Number is Not Acceptable)
16060 S.W. 86 Ave.

City
MIAMI FL Zip Code
33157

8. The above named 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 the obligations of registered agent.

SIGNATURE **DANIEL DEL SOL, PRESIDENT** 4/21/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
LETHBRIDGE, R P
13615 S. DIXIE HWY #114, PMB-383
MIAMI FL 33176** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**ROSEMARIE P. LETHBRIDGE
16060 S.W. 86 Ave
MIAMI, FL 33157** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
DELSOL, D
13615 S. DIXIE HWY #114, PMB-383
MIAMI FL 33176** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
DANIEL DEL SOL
16060 S.W. 86 Ave
MIAMI, FL 33157** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
DIAZ, D
9674 NW 10 AVE, H-856
MIAMI FL 33150** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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CITY-ST-ZIP
☐ Change ☐ Addition

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 supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **DANIEL DEL SOL** 4/21/03 (305) 252-7635
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)