## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Apr 23, 2001 8:00 am Secretary of State DOČÚMÉNT # **P97000055898** 1. Entity Name ROOF TILE TRANSPORTATION, INC. 4-23-2001 90178 050 \*\*\*158.75 Principal Place of Business Mailing Address 819 SOUTH FEDERAL HIGHWAY SUITE 201 819 SOUTH FEDERAL HIGHWAY SUITE 201 STUART FL 34994 STUART FL 34994 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite 103 Suite 103 City & State City & State Applied For 4. FEI Number 65-0762717 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired $\mathbf{x}$ x Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name <u>Rosemarie Zummo</u> **GUNTER, CECIL** Street Address (P.O. Box Number is Not Acceptable) 819 SOUTH FEDERAL HIGHWAY SUITE 201 819 S. Federal Highway, Suite-103 STUART FL 34994 City Stuart Zip Code 34994 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 Rosemarie Zummo SIGNATURE Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) $\mathbf{x}\mathbf{x}$ Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. Change ☐ Addition TITLE ☐ Delete TITLE NAME ZWEMER, AMY NAME 819 SOUTH FEDERAL HIGHWAY SUITE 201 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP STUART FL 34994 DP Change ☐ Addition TITI F NAME KIRKHART, DAVID NAME STREET ADDRESS 819 SOUTH FEDERAL HIGHWAY SUITE 201 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP STUART FL 34994 ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME ZUMMO, ROSEMARIE -NAME STREET ADDRESS 819 SOUTH FEDERAL HIGHWAY SUITE 201 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP STUART FL 34994 Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

TITLE

NAME

STREET ADDRESS CITY-ST-7IP

☐ Delete

TITLE

NAME

STREET ADDRESS

David Kirkhart X) CT

☐ Change

☐ Addition

CR2E034 (10/00)