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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000070814

1. Corporation Name

MANFRED FRANCK ROOFING. INC.

	-							
Principal Place of Business Mailing Address								1811 8181 1841
6120 SW 26 ST 6120 SW 26 ST								
MIRAMAR FL 33023 MIRAMAR FL 33023								
	•					DO NOT WRITE II	1 THIS SPACE	
}						3. Date Incorporated or Qualifed 08/14/1997		
Principal Place of Business 2a. Mailing Address			ddress			4. FEI Number	Apı	plied For
21		26				59-3465884	Not	t Applicable
Suite, Apt.	#, etc.	Suite, Apt	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 A	
22	·	27				5. Certificate of Status Desired	Fee Re	quired
City & State	e	City & Sta	ate			6. Election Campaign Financing	\$5.00	May Be
23	The American	28				Trust Fund Contribution	Added to	Fees
Zip	Country	Zip		Country	/	8. This corporation owes the current y		ļ
24	25	29	30			Personal Property Tax.	Yes	□No
 1	9. Name and Address of Curre	nt Registered Age	nt			10. Name and Address of New Regis	tered Agent	
				81	Name			
FRANCK, MANFRED				82	Stroot A	Address (P.O. Box Number is Not Acceptable)		———
6120 SW 26 ST				02	Sugar	duless (F.O. Dox Humber is Not Acceptable)		
MIR/	AMAR FL 33023			83	1			
					<u>L</u>			
	•			84	City		FL 85 Zip C	ode
Office Are	egistered agent, or both, in the State in familiar with, and accept the obliga	e of Flonda, Such cl ations of, Section 6	nange was author 07.0505, Florida S	ized by Statutes	the corpo	corporation submits this statement for the purpration's board of directors. I hereby accept the	oose of changing its appointment as reg	registered pistered
	Signature, typed or printed name of registered age			13.	nt signature re	quired when reinstating) ADDITIONS/CHANGES TO OFFICE		RS IN 12
12.	P OFFICERS AI	ND DIRECTORS		13.	—т	ADDITIONS/CHANGES TO OFFICE	Change	Addition
TITLE	, •	L	_		}			
NAME	MANFRED, FRANCK			I.2 NAME	J			j
STREET ADDRESS	6120 S.W. 26TH STREET		1,1	.3 STREE	TADDRESS			
CITY-ST-ZiP	MIRAMAR FL 33023			4 CITY-S	T-ZIP			DAMES-
TITLE '		L	DELETE	1.1 TITLE			☐ Change	☐ Addition
NAME	. '		:	2.2 NAME				,
STREET ADDRESS			J :	.3 STREE	TADDRESS			
CITY-ST-ZIP	• • •		1	. 4 CITY-1	ST-ZIP	<u> </u>		
TITLE			DELETE :	3.1 TITLE			Change	☐ Addition
NAME			1 :	3.2 NAME				
STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·	.· -		.3 STREE	TADDRESS	•		`
CITY-ST-ZIP	, .			3.4. CITY-:	j.			}
TITLE		<u>_</u>		1.1 TITLE	<u>, ы</u>		☐ Change	☐ Addition
ļ		_		, 2 NAME				
NAME					T ADDRESS		•	
STREET ADORESS	· · ·				1			
CITY-ST-ZIP	·			\$.4 CITY-\$	ST-ZIP			

14. 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 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 attachment with an address, with all other like empowered.

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY+ST-ZIP

SIGNATURE:

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

☐ DELETE

☐ DELETE

4.22.1999

Daytime Phone #

Change

Change

Addition

Addition

FILED

Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90017 035 ***150.00