SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS Jul 14, 1999 8:00 am Secretary of State

07-14-1999 90006 025 \*\*\*150.00

**FILED** 

## **DOCUMENT #**

P97000097106 1. Corporation Name

HAMMERHEAD OF SOUTH FLORIDA, IN	HAMMERHEAD	OF	SOUTH	FLORIDA,	INC.
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_ <del> </del>								hild 1911) ineel kort besid ein lebt	
Principal Place	of Business	Mailing A	ddress						
258 TROPIC DR. LAUDERDALE BY THE SEA FL 33308  258 TROPIC DR. LAUDERDALE BY THE SEA FL 33308									
					. 33308		DO NOT WRITE IN THE CRACE		
							DO NOT WRITE IN THIS SPACE		
							3. Date Incorporated or Qualified		
				,			11/10/1997	<del></del>	
<ol><li>Principal Plant</li></ol>	ice of Business	2a. Mailin	g Address				4. FEI Number	Applied For	
. [		26					65-0794886	Not Applicable	
Suite, Apt. #, etc.			Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional	
-		27					Fee Required		
City & State		City &	City & State				6. Election Campaign Financing	\$5.00 May Be	
-		28					Trust Fund Contribution	Added to Fees	
Zip	Country	Zip		Cou	ntry		8. This corporation owes the current year	<i>i</i>	
7	25	29 30					Intangible Personal Property.	Yes No	
'	9. Name and Address of Cu	rrent Registered	Agent				10. Name and Address of New Registered	d Agent	
					81	Name			
PRIC	CE, MICHAEL B				82	Stroot Ada	tress (P.O. Box Number is Not Acceptable)		
258	TROPIC DR.				82	Sueer Add	gless (F.O. Box Number is Not Acceptable)		
LAU	DERDALE BY THE SEA FL	33308			83				
					84	City	F	85 Zip Code	
		0500 1 007 1500	Classica Ctatuda	<b>1</b> - 0	نسا	named sam	oration submits this statement for the purpose of		
office or r	egistered agent, or both, in the S	State of Florida, Su	ch change was a	authorized	t by	the corpora	tion's board of directors. I hereby accept the app	ointment as registered	
agent. I a	m familiar with, and accept the o	obligations of, section	on 607.0505, Fl	orida Stat	utes	5.			
SIGNATURÉ:							guired when reinstating) DATE	<del></del>	
	Signature, typed or printed name of registere				red A	gent signature re	ADDITIONS/CHANGES TO OFFICERS A	ND DIDECTORS IN 12	
12.		S AND DIRECTOR		13.			ADDITIONS/CHANGES TO OFFICERS A		
IIILE	D		DELETE	1.1 717		Ì		Change Addition	
-	PRICE, MICHAEL B			1.2 NA					
THEE! ADDKESS	258 TROPIC DR.			1.3 ST	REET	ADDRESS			
174.57 Z#P	LAUDERDALE BY THE SE	A FL 33308		1.4 CT	1Y-\$T	-ZIP			
IIILE			DELETE	2.1 TIT	LLE	İ		Change Addition	
_				2.2 NA	ME				
I ADORESS				2.3 ST	REET	ADDRESS			
11.4-2-i-Zib				2.4 CI	TY-ST	-ZIP			
TITLE			DELETE-	3.1-117	LE -		The second of th	Change - Addition	
				3.2 NA	ME	ļ			
ore el adminess				3,3 ST	REET	ADDRESS			
114-21-219				3,4 CI	TY-ST	-7IP			
1			DELETE	4,1 TIT				Change Addition	
. 1			L DELET	4.2 NA					
-						ADDRESS			
······ I ADDING SE				- 1					
				4.4 CI		-2(P			
			DELETE	5,1 TI				Change Addition	
				5.2 NA					
· ··· · · · · · · · · · · · · · · · ·				5.3 ST	REET	ADDRESS			
117-51-ZID				5.4 CI		r-ZiP			
			DELETE	6.1 TI	ΓE			Change Addition	

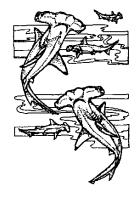
I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have 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.

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

- NATURE:

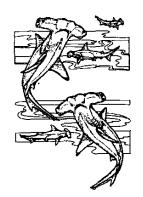
CR2E034 (5/99)

587777-90006-25 P97000097(06



## HAMMERHEAD ROOFING, INC.

258 Tropic Drive
Fort Lauderdale, FL 33308
BROWARD (954)776-0655
LOWER KEYS (305) 872-9020
TOLL FREE 1(888) 981-7663
Fax (954)772-6189



July 7, 1999

Florida Department of State Division of Corporations Annual Reports Filings P.O. Box 1500 Tallahassee, FL. 32302

## Dear Sir or Madam:

Back in December of 1998 my corporation underwent a number of changes, including a change of name. To date I have not received the 1999 Profit Corporation Annual Report. But yesterday, 7/6/99 I received a second notice. I called the number provided and informed the woman of my situation and was informed to fill out the report and add this letter and a check for \$150.00.

Thank you for your help,

Hammerhead Roofing