2002 UNIFORM	BUSINESS	REPORT	(UBR
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DOCUMENT # P97000099391					FILED			
A-1 CUSTOM ROOFING CORP.				02 OCT 29 PM 2: 47				
Principal Pla	ce of Business	Mailing Address	- , ,			SECRETAR TALLAHASS	Y OF STA SEE, FLOF	TE RIDA
STE 14-F MIAMI FL 33		8181 NW 36 ST STE 14-F Miami FL 33166			(\$81/271/10 t	Elit lääti aanu aanu aanu a	B(18 181(8 18188 (5))	a laigi ciai iga
US 2. Principal I	Place of Business 1 SW 2hd St	US 3. Mailing Address (07 6) SW 2	end St.					
Suite, Apt	. #, etc.	Suite, Apt. #, etc.			REMST	OO NOTWRITE IN THE	HIS SPACEO	7
Gity & Sta			H		4. FEI Number 6	5-0798059		applied For lot Applicable
331 U	Country WOM-Da De 6. Name and Address of Current R	33144-	Country <u>May</u>	base	5. Certificate of Sta		\$8.75 Ac Fee Requir	dditional ed
		egistered Agent	Name		7. Name and Addre	ess of New Register	ed Agent	
GOMEZ, ARNOLDO <u>6800 S.W. 40 S</u> T. STE 341			Street /	et Address (P.O., Box Number is Not Acceptable)				
MIAMI FL			Ru	ani			L Zzz	44
the above	e named entity submits this statement for the tions of registered agent. Signature, typed or printed name of registered agent and					ne State of Florida. Ta	am familiar with	, and accept
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) NOTE: Registered Agent signature required was provided in the provided was provided with the provided was provid				10. Election C	DAT Campaign Financing d Contribution.	\$5.0	00 May Be d to Fees	
11. TITLE <	OFFICERS AND DI		12.			GES TO OFFICERS A		S IN 11
NAME STREET ADDRESS CITY-ST-ZIP	GOMEZ, ARNOLDO 6800 SW 40 ST., STE. 341 MIAMI FL 33155	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	676	NDENT 21 S W 27 M 1 F1 3	2 31 , 3144	√ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GOMEZ, ARNOLDO 6800 SW 40 ST., STE. 341 MIAMI FL 33155	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition
ITLE NAME STREET ADDRESS STY-ST-ZIP		Ŭ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	228	PRESTOR A RUIZ BW 32 ami, T	n+ 2 2 2 2 331	☐ Chañge	Addition
ITLE IAME ITREET ADDRESS ITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	so w	(0000	008640	☐ Change	Addition
ITLE AME TREET ADDRES ITY-ST-ZIP		□ Delete	NAME STREET ADDRESS CITY-ST-ZIP	1		- 91912 - U E1	Change	Addition
TLE . AME TREET ADDRESS TY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition
of the corp	ertify that the information supplied with this on this report or supplemental report is tru loration or the receiver or trustee empowe or on an attachment with an address, with	red to execute this report on re	exemption state gnature shall ha equired by Cha	ed in Secti ave the sar pter 607, F	on 119.07(3)(i), Florid ne legal effect as if m lorida Statutes; and th	a Statutes. I further c ade under oath; that hat my name appears	ertify that the in I am an officer in Block 11 or	formation or director Block 12 if

SIGNATURE: