
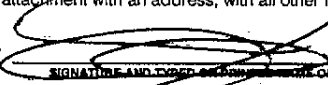


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 10, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P98000006642</b>		
1. Entity Name <b>ROOFS BY CHERRY, INC.</b>		
Principal Place of Business <b>3901 SW 40TH AVE HOLLYWOOD, FL 33023</b>	Mailing Address <b>3901 SW 40TH AVE HOLLYWOOD, FL 33023</b>	
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent  <b>CHERRY, JOHN 3901 SW 40TH AVE HOLLYWOOD, FL 33023</b>		<b>DO NOT WRITE IN THIS SPACE</b>
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP CHERRY, JOHN 3901 SW 40TH AVE HOLLYWOOD, FL 33023	<b>DO NOT WRITE IN THIS SPACE</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CHERRY, IRIS J 5050 SW 188 AVE FT. LAUDERDALE, FL 33332	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P VINCENT, CHERRY 3901 SO 40 AVE. HOLLYWOOD, FL 33023	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  <b>John Cherry V. President</b>		Date _____ Daytime Phone # _____



01042005 No Chg-P CR2E034 (10/03)

4. FEI Number <b>65-0810468</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

000001175320  
01/10/05-80044-022 150.00

**DO NOT WRITE  
IN THIS SPACE**

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