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2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

03 SEP 24 PM 12:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA




CHECK HERE IF MAKING CHANGES

03

DOCUMENT # P98000018098

1. Entity Name
SHILOH ROOFING CO., INC. OF SOUTH FLORIDA



Principal Place of Business
**1040 N.W. 125TH STREET
MIAMI FL 33168**

Mailing Address
**1040 N.W. 125TH STREET
MIAMI FL 33168**

2. Principal Place of Business
1040 N.W. 125th St

3. Mailing Address
1040 N.W. 125th St

Suite, Apt. #, etc.

City & State
Miami Fla.

City & State
Miami Fla.

Zip
33168

Country
U.S.A.

4. FEI Number
65-0836162

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**HUDSON, MICHAEL M
1040 N.W. 125TH STREET
MIAMI FL 33168**

7. Name and Address of New Registered Agent

Name _____

Street Address (P.O. Box Number is Not Acceptable) _____

City **FL** Zip Code _____

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 _____ DATE _____

Signature, typed or printed name of registered agent and use if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		<input type="checkbox"/> Delete
TITLE	PSA	<input type="checkbox"/>
NAME	HUDSON, MICHAEL M	<input type="checkbox"/>
STREET ADDRESS	1040 NW 125TH ST	<input type="checkbox"/>
CITY-ST-ZIP	MIAMI FL 33168	<input type="checkbox"/>
TITLE		<input type="checkbox"/>
NAME		<input type="checkbox"/>
STREET ADDRESS		<input type="checkbox"/>
CITY-ST-ZIP		<input type="checkbox"/>
TITLE		<input type="checkbox"/>
NAME		<input type="checkbox"/>
STREET ADDRESS		<input type="checkbox"/>
CITY-ST-ZIP		<input type="checkbox"/>
TITLE		<input type="checkbox"/>
NAME		<input type="checkbox"/>
STREET ADDRESS		<input type="checkbox"/>
CITY-ST-ZIP		<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE		<input type="checkbox"/>	<input type="checkbox"/>
NAME		<input type="checkbox"/>	<input type="checkbox"/>
STREET ADDRESS		<input type="checkbox"/>	<input type="checkbox"/>
CITY-ST-ZIP		<input type="checkbox"/>	<input type="checkbox"/>
TITLE		<input type="checkbox"/>	<input type="checkbox"/>
NAME		<input type="checkbox"/>	<input type="checkbox"/>
STREET ADDRESS		<input type="checkbox"/>	<input type="checkbox"/>
CITY-ST-ZIP		<input type="checkbox"/>	<input type="checkbox"/>
TITLE		<input type="checkbox"/>	<input type="checkbox"/>
NAME		<input type="checkbox"/>	<input type="checkbox"/>
STREET ADDRESS		<input type="checkbox"/>	<input type="checkbox"/>
CITY-ST-ZIP		<input type="checkbox"/>	<input type="checkbox"/>

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* Date: **9-9-03** Daytime Phone #: **305-807-8870**
9-9-03 305-681-4782

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (4/03)

B

Attachment

80147015
#D98000018098

Shiloh Roofing Co. of South Florida
1040 N.W. 125 ST.
Miami, FL 33168

Florida Department of State Secretary
Glenda E Hood
Division of Corporations
P.O Box 6327 Tallahassee 32314

I Michael M Hudson (Sole owner and qualifier of Shiloh Roofing Co) have not received a prior corporate filing notice due May 1, 2003. I am now sending the corporate filing fee of \$150 plus an additional \$8.75 for the certificate reflecting my corporate entity's status.

Thank you very much yours respectfully,

Michael M Hudson Pres. September 9, 2003
Michael M. Hudson Pres. Shiloh Roofing Co. Inc. of South Florida