

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000023353

FILED
Apr 29, 2004
Secretary of State

Entity Name: ALL-PRO ROOF & EXTERIOR CLEANING, INC.

Current Principal Place of Business:

6990 HUNDRED ACRE DR
COCOA, FL 32927 UD

New Principal Place of Business:

Current Mailing Address:

6990 HUNDRED ACRE DR
COCOA, FL 32927 UD

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

LYONS, PAUL H
6990 HUNDRED ACRE DR
COCOA, FL 32927

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: LYONS, PAUL
Address: 6555 GREENWOOD AVE
City-St-Zip: COCOA, FL 32927

Title: VSD () Delete
Name: LYONS, ROSE
Address: 6555 GREENWOOD AVE
City-St-Zip: COCOA, FL 32927

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: LYONS, PAUL
Address: 6990 HUNDRED ACRE DR.
City-St-Zip: COCOA, FL 32927

Title: VSD (X) Change () Addition
Name: LYONS, ROSE
Address: 6990 HUNDRED ACRE DR.
City-St-Zip: COCOA, FL 32927

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL H. LYONS

PTD

04/29/2004

Electronic Signature of Signing Officer or Director

Date