FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P98000072937

MIAMI-DADE ROOFING CORP.

FILED Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90088 026 ***150.00



Principal Place of Business Mailing Address								
3125 S.W. 7TH AVENUE		3125 S.W. 7TH AVENUE MIAMI FL 33155			·		•	
MIAMI FL 33155					DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed			
1					08/20/1998		Ì	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number		Applied For	
21 3/25 SW 75 th Ave 26 3/25 SW					Hpply- FOR		Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired		75 Additional e Required		
City & State City & State City & State City & State RIGHT					6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
-Zip	Country		-Country		8. This corporation owes the current year			
24	25 33/55	29 72 30	77	155	Personal Property Tax.	Yes	□No	
9. Name and Address of Current Registered Agent					10. Name and Address of New Register	ed Agent		
INICA	ANTE, REINALDO	•	81	Name	•	. <u> </u>		
8125 S.W. 7TH AVENUE 3125 SW 75 Bue			82	Street Addr	reet Address (P.O. Box Number is Not Acceptable)			
MIAMI FL 33155			83					
			84	City		85 85	Zip Code	
agent. I ar SIGNATURE	egistered agent, or both, in the State of m familiar with, and accept the obligation Signature, typed or printed name of registered agent is	ns of, Section 607.0505, Florida	a Statutes		on's board of directors. I hereby accept the ap		- Is registered	
12.			13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRE	CTORS IN 12	
TITLE	PD □ DELETE 1,1 II		1,1 TITLE		•	Cha	nge	
NAME	14 /14 (-1 / 1-1 /		1.2 NAME					
STREET ADDRESS	3125 S.W. 7TH AVENUE 3/25 SW 75 9-4 138		1.3 STREET	ADDRESS				
CITY-ST-ZIP				T-ZIP	<u>.</u>			
TITLE	☐ DELETE 2.1 TI		2.1 TITLE	Ì		Chai	nge	
NAME			2.2 NAME				1	
STREET ADDRESS	1		2.3 STREET	ì		•	+	
CITY-ST-ZIP TITLE			2. 4 CITY-5 3.1 TITLE	ST-ZIP		☐ Cha	nge Addition	
NAME			3.2 NAME		•			
STREET ADDRESS			3.3 STREET	ADORESS				
CITY-ST-ZIP			3.4. CITY-S	1				
TITLE		☐ DELETE	4.1 TITLE			Cha	nge Addition	
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET	ADDRESS			.	
CITY-ST-ZIP			4.4 CITY-S	T-ZIP				
TITLE		☐ DELETE	5.1 TITLE			Cha	nge	
NAME			5.2 NAME		•	•	ļ	

CITY-ST-ZIP 14. 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, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

62 NAME

SIGNATURE: >

STREET ADDRESS

STREET ADDRESS

CITY-\$T-ZIP

TITLE

NAME

☐ DELETE

Change

☐ Addition