


AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Mar 05, 1999 8:00 am
Secretary of State

03-05-1999 90051 032 ***150.00

08-24-1999 90006 022 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P98000074561 1. Corporation Name TECH ROOFING, INC.					
Principal Place of Business 7698 N.W. 186TH STREET MIAMI FL 33015			Mailing Address 7698 N.W. 186TH STREET MIAMI FL 33015		



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business				2a. Mailing Address				3. Date Incorporated or Qualified 08/26/1998			
21 Suite, Apt. #, etc.				26 Suite, Apt. #, etc.				4. FEI Number 65-0859841			
22 City & State				27 City & State				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
23 Zip				28 Zip				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees			
24 Country				29 Country				8. This corporation owes the current year Intangible Personal Property. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent EXPOSITO, AGUSTIN 7698 N.W. 186TH STREET MIAMI FL 33015				10. Name and Address of New Registered Agent			
81 Name				82 Street Address (P.O. Box Number is Not Acceptable)			
83				84 City			
				FL 85 Zip Code			

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE D NAME EXPOSITO, AGUSTIN STREET ADDRESS 7698 N.W. 186TH STREET CITY-ST-ZIP MIAMI FL 33015				1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				2.1 TITLE Change <input type="checkbox"/> Addition <input type="checkbox"/>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				WE did not receive the first form to file the Annual Report. Enclose please find 2nd notice with a check in the amount of \$150.00 please abate the penalties since we never received the first one. Tech Roofing, Inc.			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				Addition <input type="checkbox"/>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				Addition <input type="checkbox"/>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				Addition <input type="checkbox"/>			

14. I hereby certify that the information supplied with this form 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.

SIGNATURE:

Agustin Exposito
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Date 5/21/99
 Daytime Phone #

CR2E034 (5/99)