

2000 UNIFORM BUSINESS REPORT (UBR)

5/1

FILED
Jun 16, 2000 8:00 am
Secretary of State

05-17-2000 90870 021 ***150.00

DOCUMENT # P98000096948

1. Entity Name

SOUTHERN EXTERIORS ROOFING AND WATERPROOFING, INC.

Principal Place of Business

12265 S. DIXIE HWY
 MIAMI FL 33156

Mailing Address

12265 S. DIXIE HWY
 MIAMI FL 33156-5260

2. Principal Place of Business

SAME

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0927034

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

OPPER, DAVID
 12265 S. DIXIE HWY
 MIAMI FL 33156

7. Name and Address of New Registered Agent

Name

SAME

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.

SIGNATURE

Signature of officer or principal of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4-27-00

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. ☐

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	OPPER, DAVID	<i>President</i>
STREET ADDRESS	12265 S. DIXIE HWY	
CITY-ST-ZIP	MIAMI, FL 33156	
TITLE	Gordon McDonald	<input type="checkbox"/> Delete
NAME	12265 S. Dixie	<i>V. President</i>
STREET ADDRESS	MIAMI FL 33156	
CITY-ST-ZIP		
TITLE	Lloyd Oppen	<input type="checkbox"/> Delete
NAME	12265 S. Dixie	
STREET ADDRESS	MIAMI FL	<i>Secretary</i>
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DAVID Oppen	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	12265 S. Dixie	
STREET ADDRESS	MIAMI, FL 33156	<i>Pres</i>
CITY-ST-ZIP		
TITLE	Gordon McDonald	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	12265 S. Dixie	
STREET ADDRESS	MIAMI, FL 33156	
CITY-ST-ZIP		
TITLE	Lloyd Oppen	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	12265 S. Dixie	
STREET ADDRESS	MIAMI, FL	<i>Secretary</i>
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address with another like empowered.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

6-10-2000 305-996-7330

305 232-0361 OFFICE

CR2E034 (9/99)