

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 22, 2004 8:00 am
Secretary of State

04-22-2004 90036 007 ***150.00

DOCUMENT # P98000097375

1. Entity Name

RELIABLE ROOFERS, INC



DO NOT WRITE IN THIS SPACE

94060044

2. Principal Place of Business

2138 MEARS PARKWAY

Suite, Apt. #, etc.

3. Mailing Address

2138 MEARS PARKWAY

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
MARGATE, FL

City & State
MARGATE, FL

4. FEI Number

65-0884221

Applied For

Not Applicable

Zip
33063

Country
US

Zip
33063

Country
US

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

WATSON, O'BRIAN

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

2138 MEARS PARKWAY

City

MARGATE

FL

Zip Code
33063

**DO NOT WRITE
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
WATSON, O'BRIAN
840 NW 81ST WAY
PLANTATION, FL 33324

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
WATSON, FABION
2120 NW 82 TER
SUNRISE, FL 33322

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TS
WATSON, KENYA
2120 NW 82 TER
SUNRISE, FL 33322

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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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 on an attachment with an address, with all other like empowered.

SIGNATURE: *Kenya M. Watson TS*

KENYA WATSON TS APRIL 19, 2004 954 972-3343

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/02)

Attachment

2138 Mears Parkway Margate, FL. 33063 P: (954) 972 3343 F: (954) 972 0669 <http://www.reliable-roofers.com>



#P98000097375

April 19, 2004

PLEASE NOTE:

The correct spelling of the VP's first name is FABION. The application was filed properly on last year but was recorded incorrectly. Please make changes to the spelling of the VP's name.

Correct → FABION
Incorrect → FABIAN

Thank you for your attention to this important matter.

Kenya M. Watson TS
Kenya M. Watson TS