

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000074597

FILED
Apr 27, 2004
Secretary of State

Entity Name: ENTEGRA ROOF TILE CORPORATION-MIAMI

Current Principal Place of Business:

819 SOUTH FEDERAL HIGHWAY
SUITE 300
STUART, FL 34994

New Principal Place of Business:

Current Mailing Address:

819 SOUTH FEDERAL HIGHWAY
SUITE 300
STUART, FL 34994

New Mailing Address:

FEI Number: 65-0942345 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ZUMMO, ROSEMARIE
819 SOUTH FEDERAL HIGHWAY
SUITE 300
STUART, FL 34994 US

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: D () Delete
Name: JOHNSON, SCOTT
Address: 819 S. FEDERAL HIGHWAY, SUITE 300
City-St-Zip: STUART, FL 34994

Title: PD () Delete
Name: SINCLAIR, JAIRO
Address: 819 S. FEDERAL HIGHWAY, SUITE 300
City-St-Zip: STUART, FL 34994

Title: ST () Delete
Name: HARGRAVE, LES
Address: 819 S. FEDERAL HIGHWAY, SUITE, 300
City-St-Zip: STUART, FL 34994

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change () Addition
Name: TORRES, LUCY
Address: 819 S. FEDERAL HIGHWAY, SUITE, 300
City-St-Zip: STUART, FL 34994

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: JAIRO SINCLAIR

PD

04/27/2004

Electronic Signature of Signing Officer or Director

_____ Date