

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000074597

FILED  
Apr 20, 2006  
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: TORRES, LUCY  
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: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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

04/20/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date