

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

102

DOCUMENT # P99000092787

1. Entity Name
Roberts Roofing, Inc.

FILED

02 JAN -3 AM 8:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
5758 Heckscher Dr.
Suite, Apt. #, etc.

3. Mailing Address
5758 Heckscher Dr.
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Sax. Florida
Zip
32226

City & State
Sax. FL
Zip
32226

Country
U.S.

4. FEI Number
59-3604731

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Frankie Roberts

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

5758 Heckscher Dr.

City
Jacksonville FL Zip Code
32226

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.

void. SIGNATURE **Frankie Darlene Roberts** **Frankie Darlene Roberts** **12-31-01**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
(See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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
NAME
STREET ADDRESS
CITY-ST-ZIP
**Jeffery Roberts President/
5758 Heckscher Dr. Secretary
Sax., FL 32226**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**300004792393--0
-01/23/02--01080--002
****150.00 ****150.00**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Vice President/Treasurer
Frankie Roberts Qualifying
5758 Heckscher Dr. Agent
Sax., FL 32226**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
LS

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

SIGNATURE: **Frankie Roberts** **Jeffery Roberts** **12-31-01** **398-0170**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/01)

TO whom it may Concern,

202

I did not Recieve my UBR Report
by mail due to: I did not recieve
mail For 1 month, 2 month in Texas
For death in Family. I have a personal
mail-carrier For the island we Live
on and the carrier has changed
twice this year. Our business Address
IS the same as our residence.
Between all this, I'm not sure exactly
which reason is why I did not recieve
my UBR. I would deeply appreciate
if you would except my Fee of \$150.00
along with my application of the UBR.

I sincerely
Thank you

Frankie Roberts
Frankie Roberts