

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

575813

1. Entity Name

Hi-Rise Commercial Roofing, Inc.

Principal Place of Business

Mailing Address

3700 HACIENDA BLVD. SUITE H
FT. LAUDERDALE, FL. 33314-2823

2. Principal Place of Business

3. Mailing Address

3700 HACIENDA BLVD.

3700 HACIENDA BLVD.

Suite, Apt. #, etc.

SUITE H

Suite, Apt. #, etc.

SUITE H

City & State

Ft. Lauderdale FL.

City & State

Ft. Lauderdale FL.

Zip

Country

33314-2823

Broward

Zip

Country

33314-2823

Broward

6. Name and Address of Current Registered Agent

4. FEI Number

65-0275147

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

800004703028--5

-12/03/01--01085--017

****150.00 ****150.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 NOV 19 PM 1:06

Name

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, 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) ☐

FILE NOW! FEE IS \$150.00
After MAY 1, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: D SHAWIN, GEORGE
NAME: 3700 HACIENDA BLVD. SUITE H
STREET ADDRESS: FT. LAUDERDALE FL. 33314-2823
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: D EARL, WILLIAM B
NAME: 2000 NW 22 ST
STREET ADDRESS: FT. LAUD. FL.
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: D PRITTS, DANAF
NAME: 2000 NW 22 ST
STREET ADDRESS: FT. LAUD. FL.
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Delete
NAME: ☐ Delete
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TITLE: ☐ Delete
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CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition

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 all other like empowered.

SIGNATURE:

George J. Shawin 11/16/01 954-792-5651

CR2E034 (11/00)