

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V05105

FILED
Jan 04, 2007
Secretary of State

Entity Name: ALL ATLAS ROOFING OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

2280 NW 16 ST
POMPANO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

2280 NW 16 ST
POMPANO BEACH, FL 33069

New Mailing Address:

FEI Number: 65-0302487

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUCHLER, MICHAEL T
2280 NW 16 ST
POMPANO BEACH, FL 33069 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: PD () Delete
Name: KUCHLER, MICHAEL
Address: 5430 NW 66
City-St-Zip: CORAL SPRINGS, FL

Title: SD () Delete
Name: KUCHLER, NICOLE,
Address: 5430 NW 66
City-St-Zip: CORAL SPRINGS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KUCHLER, MICHAEL
Address: 5430 NW 66 AVE
City-St-Zip: CORAL SPRINGS, FL 33067

Title: SD (X) Change () Addition
Name: KUCHLER, NICOLE,
Address: 5430 NW 66 AVE
City-St-Zip: CORAL SPRINGS, FL 33067

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: MICHAEL T. KUCHLER

PD

01/04/2007

Electronic Signature of Signing Officer or Director

Date