

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1996.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V08748 (8)

1. Corporation Name

THOMAS N. THOMAS ROOFING, INC.

Principal Place of Business

**16030 S.W. 100 COURT
MIAMI FL**

Mailing Address

**16030 S.W. 100 COURT
MIAMI FL**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/22/1992

3a. Date of Last Report

01/25/1994 7/5/95

4. FEI Number

65-0310922

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 193.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**THOMAS, MICHAEL
16030 SW 100 COURT
MIAMI FL**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0507 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors, thereby, to accept the appointment as registered agent. I am familiar with and accept the obligation of Section 607.0508, Florida Statutes.

SIGNATURE

Michael A. Thomas

Date of Signature: **7/29/96**

12. OFFICERS AND DIRECTORS

TITLE

D

NAME

**THOMAS, MICHAEL
16030 SW 100TH CT.
MIAMI FL**

STREET ADDRESS

CITY - ST - ZIP

TITLE

D

NAME

**THOMAS, RAYMOND
16030 SW 100TH CT.
MIAMI FL**

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13.

ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

☐

Change

☐

Addition

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE

☐

Change

☐

Addition

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE

☐

Change

☐

Addition

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE

☐

Change

☐

Addition

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE

☐

Change

☐

Addition

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE

☐

Change

☐

Addition

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

**700001914947
-08/07/96--01020--034
***225.00**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.04(4)(f), Florida Statutes. I further certify that the information indicated on this annual report or successor annual report is true and accurate and that my signature shall have the same legal effect as if it is a sworn 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 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE:

Michael A. Thomas

Michael A. Thomas

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/29/96

(305) 253-9936

CR2E034 (3/95)