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May 01 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # V08748 (8)
1. Corporation Name
THOMAS N. THOMAS ROOFING, INC.

Principal Place of Business

Mailing Address

15601 SW 137 AVE.
#154
MIAMI FL 33177
US

15601 SW 137 AVE.
#154
MIAMI FL 33177
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified.

01/22/1992

4. FEI Number

65-0310922

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 13713 S.W. 147 CIR. LN.

Suite, Apt. #, etc.

22 #2

23 City & State
Miami, FL

24 Zip
33186

Country
U.S.A.

2a. Mailing Address

26 13713 S.W. 147 CIR. LN.

Suite, Apt. #, etc.

27 #2

28 City & State
Miami, FL

29 Zip
33186

Country
U.S.A.

9. Name and Address of Current Registered Agent

THOMAS, MICHAEL
15601 SW 137 AVE.
#154
MIAMI FL 33177

10. Name and Address of New Registered Agent

81 Name
Thomas, Michael
82 Street Address (P.O. Box Number is Not Acceptable)
13713 S.W. 147 CIR. LN.
83 #2
84 City
Miami, FL
85 Zip Code
33186

11. Pursuant to the provisions of Sections 607.0502 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
THOMAS, MICHAEL
STREET ADDRESS
18030 SW 100TH CT.
CITY-ST-ZIP
MIAMI FL

TITLE ☐ DELETE

NAME
THOMAS, RAYMOND
STREET ADDRESS
18030 SW 100TH CT.
CITY-ST-ZIP
MIAMI FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
13713 S.W. 147 CIR. LN. #2
MIAMI, FL 33186

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

11-1-98 1705252-9936

CR2E034 (10/97)