

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **V68395**

(5)

1. Corporation Name

R. FREDERICKS ROOFING, INC.

FILED
Mar 25, 1996 08:00 AM
Secretary of State



Principal Place of Business

**5604 PGA BLVD.
SUITE 109
PALM BEACH GARDENS FL 33418**

Mailing Address

**5604 PGA BLVD.
SUITE 109
PALM BEACH GARDENS FL 33418**

2. Principal Place of Business

21 **5610 PGA Blvd.**

Suite, Apt. #, etc.

22 **Ste # 114**

City & State

23 **Palm Beach Gardens, Fl**

Zip

24 **33418**

Country

25 **USA**

2a. Mailing Address

26 **5610 PGA Blvd.**

Suite, Apt. #, etc.

27 **Ste # 114**

City & State

28 **Palm Beach Gardens, Fl**

Zip

29 **33418**

Country

30 **USA**

3. Date Incorporated or Qualified

10/02/1992

3a. Date of Last Report

05/01/1995

4. FET Number

65-0362645

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 has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**SABATELLO, CARL M
5604 PGA BLVD., SUITE 107
PALM BEACH GARDENS FL 33418**

10. Name and Address of New Registered Agent

81 Name

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

5610 PGA Blvd. Ste # 114

83

84 City

Palm Beach Gardens

FL

85 Zip Code

33418

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 changing agent)

DATE

12. OFFICERS AND DIRECTORS

TITLE

PD

☐ DELETE

NAME

SABATELLO, CARL M.

STREET ADDRESS

5604 PGA BLVD.

CITY-ST-ZIP

PALM BEACH GRDNS FL

TITLE

V

☐ DELETE

NAME

SABATELLO, THEODORE P.

STREET ADDRESS

5604 PGA BLVD.

CITY-ST-ZIP

PALM BEACH GRDNS FL

TITLE

V

☐ DELETE

NAME

SABATELLO, MICHAEL J., JR

STREET ADDRESS

5604 PGA BLVD.

CITY-ST-ZIP

PALM BEACH GRDNS FL

TITLE

ST

☐ DELETE

NAME

SABATELLO, PAUL T.

STREET ADDRESS

5604 PGA BLVD.

CITY-ST-ZIP

PALM BEACH GRDNS FL

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

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

5610 PGA Blvd. Ste # 114

1.4 CITY-ST-ZIP

Palm Beach Gardens, Florida 33418

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

5610 PGA Blvd Ste. # 114

2.4 CITY-ST-ZIP

Palm Beach Gardens, Florida 33418

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

5610 PGA Blvd. Ste # 114

3.4 CITY-ST-ZIP

Palm Beach Gardens, Florida 33418

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

5610 PGA Blvd. Ste # 114

4.4 CITY-ST-ZIP

Palm Beach Gardens, Florida 33418

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/29/96

(407) 626-7600

CR2E034 (12/95)