

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000113870

**Entity Name:** PIMENTEL ROOFING, INC.

**Current Principal Place of Business:**

402 ST. AUGUSTINE BLVD.  
JACKSONVILLE BEACH, FL 32250

**Current Mailing Address:**

402 ST. AUGUSTINE BLVD.  
JACKSONVILLE BEACH, FL 32250 US

**FEI Number:** 59-3584709

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PIMENTEL, RAMON O  
402 ST. AUGUSTINE BLVD.  
JACKSONVILLE BEACH, FL 32250 US

*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:** RAMON O PIMENTEL

03/30/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DP  
Name PIMENTEL, RAMON O  
Address 402 ST. AUGUSTINE BLVD.  
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title OFFICER  
Name NESS, ZACHARY  
Address 1718 FIRST ST N  
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title VP, SECRETARY  
Name PIMENTEL, PEYTON LISA  
Address 500 BISHOP GATE LN  
APT 1413  
City-State-Zip: JACKSONVILLE FL 32204

Title OFFICER  
Name VALVA, JAMES  
Address 113 12TH AVE N  
City-State-Zip: JACKSONVILLE BEACH FL 32250

*I hereby 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 all other like empowered.*

**SIGNATURE:** RAMON O. PIMENTEL

DP

03/30/2021

Electronic Signature of Signing Officer/Director Detail

Date