

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000002742

**FILED**  
**Jan 17, 2014**  
**Secretary of State**  
**CC8161704463**

**Entity Name:** BUENO ROOFING SYSTEMS, INC.

**Current Principal Place of Business:**

519 SOUTH 21 AVE  
HOLLYWOOD, FL 33020

**Current Mailing Address:**

519 SOUTH 21 AVE  
HOLLYWOOD, FL 33020

**FEI Number:** 03-0613363

**Certificate of Status Desired:** No

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

BUENO, HUGO  
825 S.E. 7TH AVE  
DELRAY BEACH, FL 33483 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            P  
Name            BUENO, HUGO  
Address        825 S.E. 7TH AVE  
City-State-Zip: DELRAY BEACH FL 33483

Title            VP  
Name            BUENO, SARA  
Address        825 S.E. 7TH AVE  
City-State-Zip: DELRAY BEACH FL 33483

*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:** HUGO BUENO

**PRESIDENT**

**01/17/2014**

Electronic Signature of Signing Officer/Director Detail

Date