02271999-90056-049-$150.00-$150.00

PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 MAR 22 AM 10:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # H70979

1. Corporation Name
A AAH AAH TERRY'S PLUMBING, INC.

Principal Place of Business	Mailing Address
~~4350 N.E. 5TH TERRACE~~	~~4350 N.E. 5TH TERRACE~~
~~OAKLAND PARK FL 33334~~	~~OAKLAND PARK FL 33334~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/13/1985

2. Principal Place of Business	2a. Mailing Address
21 4712 ne 11 AVE	26 4712 ne 11 AVE
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: Ft Lauderdale FLA	28 City & State: Ft Lauderdale FLA
24 Zip: 33334 25 Country: Broward	29 Zip: 33334 30 Country: Broward

4. FEI Number: 59-2582928 ☐ 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 the current year Intangible Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

~~FLETCHER, TAMMY J~~
~~4350 N.E. 5TH TERRACE~~
~~OAKLAND PARK FL~~

10. Name and Address of New Registered Agent

81 Name: Terry Fletcher
82 Street Address (P.O. Box Number is Not Acceptable): 4712 ne 11 AVE
83
84 City: Ft Lauderdale FL 85 Zip Code: 33334

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: Terry Fletcher pres DATE: 3-18-99
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	FLETCHER, TERRY B.		1.2 NAME	
STREET ADDRESS	3321 NE 19TH AVE		1.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL		1.4 CITY-ST-ZIP	
TITLE	VTS	X DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	FLETCHER, TAMMY J.		2.2 NAME	
STREET ADDRESS	3321 NE 19TH AVE		2.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL		2.4 CITY-ST-ZIP	
TITLE	D	X DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	FLETCHER, TAMMY J.		3.2 NAME	
STREET ADDRESS	3321 NE 19TH AVE		3.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL		3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

CR2E034 (11/98)

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, with all other like empowered.

SIGNATURE: SIGNATURE Terry Fletcher 1-29-99 954 566 4352
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #