

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

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 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 95 JAN 19 PM 12:54

CORPORATION
 ANNUAL REPORT
 1995



FLORIDA DEPARTMENT OF STATE
 Sandra B. Myrland
 Secretary
 DIVISION OF CORPORATIONS

DOCUMENT # **K10725**

(5)

95 JAN 19 PM 12:54

1. Corporation Name
NABER PLUMBING, INC.

Principal Place of Business

175 SUNSET DR.
 1094 BLAU COURT-NW
 W. MELBOURNE FL 32904
 US

Mailing Address

% WILLIAM GERIT NABER
 1094 BLAU COURT. NW
 PALM BAY FL 32907

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **12/30/1987**
 3a. Date of Last Report: **01/19/1994**

2. Principal Place of Business
 21 **175 SUNSET DR.**

2a. Mailing Address
 26

4. FBI Number: **59-2878870**
 Applied For: Not Applicable

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

5. Certificate of Status Desired: **\$8.75 Additional Fee Required**

23 City & State: **W. MELBOURNE FL**

28 City & State

6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**

24 Zip: **32904**

25 Country: **ARAWAKO**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent

**NABER, WILLIAM GERIT
 1094 BLAU COURT, NW
 PALM BAY FL 32907**

10. Name and Address of New Registered Agent

81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City **FL** 85 Zip Code

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 _____ DATE _____
(Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering))

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE: **PD**
 NAME: **NABER, WILLIAM GERIT**
 STREET ADDRESS: **1094 BLAU COURT**
 CITY-ST-ZIP: **PALM BAY FL**

1.1 TITLE Change Addition
 1.2 NAME
 1.3 STREET ADDRESS
 1.4 CITY-ST-ZIP

TITLE: **D**
 NAME: **NABER, ROSE ALBERTA**
 STREET ADDRESS: **1094 BALU COURT**
 CITY-ST-ZIP: **PALM BAY FL**

2.1 TITLE Change Addition
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

3.1 TITLE Change Addition
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

4.1 TITLE Change Addition
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

5.1 TITLE Change Addition
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

6.1 TITLE Change Addition
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY-ST-ZIP

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)(b), 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: *William G. Naber*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
WILLIAM G. NABER

1-6-95 407-764-0504
 Date Digital Signature