

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
May 05 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # K10725 (5)
1. Corporation Name
NABER PLUMBING, INC.



Principal Place of Business
175 SUNSET DR.
W. MELBOURNE FL 32904
US

Mailing Address
% WILLIAM GERIT NABER
1094 BLAU COURT. NW
PALM BAY FL 32907-8201

3. Date Incorporated or Qualified 12/30/1987
3a. Date of Last Report 01/23/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21	26	59-2878870	Not Applicable
Suite, Apt. #, etc.	27	5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required
22	27	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
City & State	28	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No
23	28	10. Name and Address of New Registered Agent	
Zip	29	81 Name	
Country	30	82 Street Address (P.O. Box Number is Not Acceptable)	
24	30	83	
25	30	84 City	
29	30	85 Zip Code	

9. Name and Address of Current Registered Agent
NABER, WILLIAM GERIT
1094 BLAU COURT, NW
PALM BAY FL 32907

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's signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	D NABER, ROSE ALBERTA
NAME	NABER, WILLIAM GERIT	1.2 NAME	1094 BLAU CT
STREET ADDRESS	1094 BLAU COURT	1.3 STREET ADDRESS	PALM BAY, FL 32901
CITY-ST-ZIP	PALM BAY FL	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	
NAME	NABER, ROSE ALBERTA	2.2 NAME	
STREET ADDRESS	1094 BLAU COURT	2.3 STREET ADDRESS	
CITY-ST-ZIP	PALM BAY FL	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	
NAME	NABER WILLIAM JR,	3.2 NAME	
STREET ADDRESS	926 COMERCE	3.3 STREET ADDRESS	
CITY-ST-ZIP	PALM BAY FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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.

SIGNATURE: _____ DATE: 05/05/97

CR2E034 (9/96)