

FILED

Jun 04 1998 8:00am
Secretary of State

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

PROFIT
CORPORATION
ANNUAL REPORT
1998FLORIDA DEPARTMENT OF STATE
Sandra S. Morham
Secretary of State
DIVISION OF CORPORATIONSDOCUMENT # M 63383
1. Corporation Name

(3)

PLUMBING BY BOB, INC.

~~REDACTED~~Principal Place of Business: 1249 WATERVIEW COURT
FT. LAUD, FL. 33326
Mailing Address:

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

01/01/88

4. FEI Number

65-0021662

Applied For
Not Applicable5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐\$5.00 May Be
Added to Fees8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

10. Name and Address of Now Registered Agent

2. Principal Place of Business
21. FT. LAUDERDALE

23. Mailing Address

26. 1249 WATERVIEW CT.

22. City & State

27. City & State

23. FT. LAUDERDALE

28. City & State

24. Zip

29. Zip

Country

25. Name and Address of Current Registered Agent

ROBERT MOORE
1249 WATERVIEW CT.
FT. LAUDERDALE, FL. 33326

001. Name

02. Street Address (P.O. Box Number is Not Acceptable)

03.

04. City

FL

05. Zip Code

11. Pursuant to the provisions of Sections 607.0505 and 607.1500, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered
office or registered agent to 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 in full conformity with, and during the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of registered agent (see Section 607.0505, Florida Statutes)

Signature of authorized signatory (see Section 607.1500, Florida Statutes)

DATE

12. OFFICERS AND DIRECTORS

ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME
2. TITLE
3. STREET ADDRESS
4. CITY-STATE-ZIP
5. PHONE
6. NAME
7. STREET ADDRESS
8. CITY-STATE-ZIP
9. TITLE
10. NAME
11. STREET ADDRESS
12. CITY-STATE-ZIP
13. TITLE
14. NAME
15. STREET ADDRESS
16. CITY-STATE-ZIP
17. TITLE
18. NAME
19. STREET ADDRESS
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21. TITLE
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98. NAME
99. STREET ADDRESS
100. CITY-STATE-ZIP

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16. CITY-STATE-ZIP

17. TITLE

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40. CITY-STATE-ZIP

41. TITLE

42. NAME

43. STREET ADDRESS

44. CITY-STATE-ZIP

45. TITLE

46. NAME

47. STREET ADDRESS

48. CITY-STATE-ZIP

Lynn Moore Vice President
1249 Waterview Ct
FT. Laud FL 33326500002552285
-06/09/98--01018--041
***150.0014. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.27(3)(b), Florida Statutes. I further certify that the information
submitted on this annual report or supplement 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 its 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 as changed, or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TITLE OF REGISTERED AGENT OR AUTHORIZED SIGNATORY

031

Filing Fee: \$150.00

CR2004 (10/97)