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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P93000028857 1. Corporation Name

PRONTO PLUMBING, INC.

Principal Plac	ce of Business	Mailing Address			i ioniissi isa iksen iiii	ı RİDILI BBILL BBENI BB	iin iinat talki ta	iği 3010 1880 1880	
12135 N.E.:11		12135 N.E. 11TH PLACE				•			
NORTH MIAMI FL 33161		NORTH MIAMI FL 33161							
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(÷			3. Date Incorporated or Q 04/20/1993	ualifed		Ì	
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number		- 	Applied For	
21		26			65-0406180		⊢	ot Applicable	
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.				· · · · · · · · · · · · · · · · · · ·		Additional	
22	78.4.8	27			5. Certifcate of Status Des	sired .		Required	
City & Sta	ite	City & State			6. Election Campaign Fina	incing	\$5.0	May Be	
23		28			Trust Fund Contribution		Added	to Fees	
Zip	Country	— ·	Zip Country		This corporation owes t	8. This corporation owes the current year Intangible			
24	25	[29]	30		Personal Property Tax.		☐ Yes	□No	
	9. Name and Address of Co				10. Name and Address of	New Registere	d Agent		
DEG	SSIN, GREGG	The first that the time to be to	1	81 Name	•				
『こう 180	O S.W. 27TH AVENUE			82 Stree	t Address (P.O. Box Number is Not A	Acceptable)			
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	MI FL 33145			83	1. 人名德里奇 阿拉斯克斯克斯克斯克斯克斯克斯克斯克斯克斯克斯克斯克斯克斯克斯克斯克斯克斯克斯克				
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11. Pursuant	to the provisions of Sections 607	7.0502 and 607.1508, Florida Statut	es, the ab	ove-named	d corporation submits this statement	for the purpose	or changing ii	s registered	
office or a sent. I a	to the provisions of Sections 607 registered agent, or both, in the Sam familiar with, and accept the o	7.0502 and 607.1508, Florida Statut State of Florida. Such change was a bligations of, Section 607.0505, Flo	es, the ab uthorized rida Statu	ove-named by the contest.	d corporation submits this statement poration's board of directors. I hereby	for the purpose accept the app	or changing i ointment as i	egistered egistered	
11. Pursuant office or i ିର agent. I a	н .	•	es, the ab uthorized rida Statu	ove-named by the contest.	d corporation submits this statement poration's board of directors. I hereby	for the purpose of accept the app	or changing ii ointment as i	s registered : registered	
SIGNATURE	Signature, typed or printed name of registere	od agent and title if applicable. (NOTE	: Registered /		required when reinstating)	DATE			
SIGNATURE	Signature, typed or printed name of registere OFFICER	or agent and title if applicable. (NOTE S AND DIRECTORS	: Registered /	gent signature		DATE	AND DIRECT	ORS IN 12	
SIGNATURE 12. TITLE	Signature, typed or printed name of registers OFFICER:	od agent and title if applicable. (NOTE	: Registered /	gent signature	required when reinstating)	DATE		ORS IN 12	
SIGNATURE 12. TITLE NAME	Signature, typed or printed name of registers OFFICER: PTVD NUGENT, GERARD W	or agent and title if applicable. (NOTE S AND DIRECTORS	: Registered /	gent signature	required when reinstating) ADDITIONS/CHANGES	DATE	AND DIRECT	ORS IN 12	
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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 of the receiver or trustee empowered to execute this seport 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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE

報告に対けて

NAME.

STREET ADDRESS.

CITY-ST-ZIP

FILED

Jan 27, 1999 8:00am

Secretary of State

01-27-1999 90001 009 ***150.00