


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
 AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**FILED**  
**Sep 15, 1999 8:00 am**  
**Secretary of State**

09-15-1999 90013 044 \*\*\*550.00

PROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
--	---	--

**DOCUMENT # V21628**  
 1. Corporation Name  
**READ PLUMBING, INC.**



Principal Place of Business <del>134 FERWOOD CT</del> <del>FERN PARK FL 32730</del> <del>US</del>	Mailing Address <del>134 FERWOOD CT</del> <del>FERN PARK FL 32730</del> <del>US</del>
--	--

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>230 Howell Branch Rd</b>	2a. Mailing Address 26 <b>2500 Howell Branch Rd</b>
Suite, Apt. #, etc. 22 <b>Suite 124</b>	Suite, Apt. #, etc. <b>Suite 124</b>
City & State 23 <b>Winter Park FL</b>	City & State 28 <b>Winter Park FL</b>
Zip 24 <b>32792</b>	Country 25 <b>USA</b>
Country 29 <b>USA</b>	Zip 30 <b>32792</b>
Country 31 <b>USA</b>	Zip 32 <b>32792</b>

3. Date Incorporated or Qualified <b>03/16/1992</b>	4. FEI Number <b>59-3110793</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees	
8. This corporation owes the current year Intangible Personal Property. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

9. Name and Address of Current Registered Agent  
**READ, LEA A**  
**134 FERWOOD CT**  
**FERN PARK FL 32730**

10. Name and Address of New Registered Agent

81 Name <b>READ Joseph R.</b>	85 Zip Code <b>32792</b>
82 Street Address (P.O. Box Number is Not Acceptable) <b>2500 Howell Branch Rd</b>	
83 <b>Suite 124</b>	
84 City <b>Winter Park</b>	State <b>FL</b>

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: *Joseph R. Read* DATE: **8-27-99**

12. OFFICERS AND DIRECTORS

TITLE <b>D</b>	<input type="checkbox"/> DELETE
NAME <b>READ, LEA A</b>	
STREET ADDRESS <b>203 POST N RAIL</b>	
CITY-ST-ZIP <b>LONGWOOD FL</b>	
TITLE <b>D</b>	<input type="checkbox"/> DELETE
NAME <b>READ, AIDA M</b>	
STREET ADDRESS <b>2500 HOWELL BRANCH ROAD</b>	
CITY-ST-ZIP <b>WINTER PARK FL</b>	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE <b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME <b>Joseph R READ</b>	
1.3 STREET ADDRESS <b>2500 HOWELL BRANCH RD.</b>	
1.4 CITY-ST-ZIP <b>WINTER PARK FL 32792</b>	
2.1 TITLE <b>D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME <b>READ, LEA A</b>	
2.3 STREET ADDRESS <b>2500 HOWELL BRANCH ROAD</b>	
2.4 CITY-ST-ZIP <b>WINTER PARK FL 32792</b>	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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.

SIGNATURE: *Joseph R. Read* DATE: **9-10-99** **407-701-1404**

0125317

CR2E034 (5/99)