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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

101

FILED Feb 16 1998 8:00am Secretary of State

Principal Place of Business (O) PLUMBING MANUFACTURERS REP. OF FLORIDA CORPORATION Principal Place of Business Mailing Address													
1102 G N. 22ND STREET P.O. BOX 76264													
TAMPA FL 33605 TAMPA FL 33 US US					R0/3-1209				DO NOT WRITE IN THIS SPACE				
								3.	Date Incorporated or Qualified				
2. Principal Place of Business 2e, Malling Address								-	09/30/1992 FEI Number			pplied For	
21	ince of Dusi	11635	26				-	59-3154106 Not Applicable					
Suite, Apt	#, etc.		Suite, Apt. #, etc.				<u>۔</u>	Certificate of Status Desired		\$8.75	Additional		
22		27					ъ.	Certificate of Status Desired			equired		
City & Stat	.0		City & State				6.	Election Campaign Financing	П		May Be to Fees		
Zip		Country	7 p Co			Country			Trust Fund Contribution This corporation owes or has p				
24		25	29	30			,		Personal Property Tax due June			∐ No	
	g, Name	and Address of Curren	Registered A	gent				10.	Name and Address of New R	egistered	Agent		
	PRMAN, SH					81	Name						
		ll av e nue				32	Street Add	dress (F	P.O. Box Number is Not Accepta	ble)			
	HTE 3 03 MPA FL 33	RAC				33							
IAMITA I'E 55000					١.	34	City		■. 85 Zip Code				
							•	FL ~					
office or r	registered at	ions of Sections 607,0502 gent, or both, in the State ith, and accept the obliga	of Florida, Suc-	h change was	authorized	bν	the corpora	peratio ation's b	n submits this statement for the board of directors. I hereby acce	purpose of pt the app	changing it ointment as	ts registered registered	
SIGNATURE	Plant vo hand	or printed name of registered ager	N nod tilo d ppolo d	do (NO)	TE: Bosiolared	***	nt signature requ	ing when	relation	DATE			
12.	Signature, types	OFFICERS AND		TE (NO	13.	-goi	it signaturo requ		ADDITIONS/CHANGES TO OFF		DIRECTOR	3S IN 12	
TITLE	PD DELETE				1.1 T(TL	E					☐ Change	☐ Addition	
NAME		ANN, STEPHEN R			1.2 NAME						ľ		
STREET ADDRESS	RUSKIN	LLEGE AVE. W.			1.3 STREET ADDRESS 1.4 CITY-S1-ZIP						Į,		
CITY-ST-ZIP TITLE	STD) FL		DELETE	2.1 TITL		-ZIP		···		Change	Addition	
NAME	-	y, steven L.		• •			2.2 NAME						
STREET ADDRESS		SUMMERWIND		2.3 STRI	2.3 STREET ADDRESS								
CITY-ST-ZIP	TAMPA	<u>FL</u>				Y - ST	T-ZIP						
TITLE	VD	SOON BAIRS II		DELETE	3.1 TITL		1				Change	☐ Addition	
NAME	DONALDSON, DAVID M. 3702 BARCELONA STREET				3.2 NAM		ADDOCCO						
STREET ADDRESS	TAMPA FL				3 3 STREET ADDRESS 3 4. CITY - ST - ZIP								
CITY-ST-ZIP TITLE	Train ra	7 te		DELETE	41 TITL	_	1-211				Change	Addition	
NAME					4. 2 NAM	ИF							
STREET ADDRESS					4.3 STAI	EET A	ADDRESS						
CITY-ST-ZIP					4 4 CITY	-ST	- ZIP						
TITLE				DELETE	5.1 TITL						☐ Change	☐ Addition	
NAME					5.2 NAM		202000						
STREET ADDRESS							ADDRESS						
CITY-SI-ZIP TITLE				DELETE	5.4 CITY 6.1 TITLE		* £11F				☐ Change	Addition	
NAME					6.2 NAM						-		
STREET ADDRESS							ADDRESS		1				
CITY-\$T-ZIP					6.4 CITY								
14. Thereby o	certify that th	e information supplied will	th this tiling do	es not qualify f	or the exen	noti	ion stated in	i Sectio	n 119.07(3)(i), Florida Statutes.	l further de	rtify that the	information	

indicated on this annual report or supplied with this him goods not quality for the exemption stated in Section 119.07(3)(t). Florida Statutes, Intriner certify that the informatic indicated on this annual report or supplied enter a sift made under cath; 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.

(6/2) 247.1611