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

**FILED PROFIT** FLORIDA DEPARTMENT OF STATE Feb 02 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 143306 (9)SEROTA PLUMBING COMPANY Principal Place of Business Mailing Address 893 N.E. 79ST 893 N.E. 79ST MIAMI FL 33138 MIAMI FL 33138 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/25/1944 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 59-0572570 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaigh Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent VENTO, RON 893 NE 79 ST. 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33138** City Zip Code 85 F 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 Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) DATE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELETE 1,1 TITLE Change VENTO. RONALD NAME 1.2 NAME **72E034** 893 N.E. 79 ST. STREET ADDRESS 1.3 STREET ADDRESS MIAM! FL CITY-ST-ZIF 1.4 CITY-ST-ZIP DELETE \_\_\_ Change Addition STV TATLE 2.1 TITLE CERRATO, BARRY 2.2 NAME NAME 893 N.E. 79 ST. STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 2. 4 CITY - ST-ZIP CITY-ST-ZIP Addition ☐ DELETE L. Change TITLE 3.1 TITLE CERRATO, BARRY NAME 3.2 NAME 893 N.E. 79 ST. STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL 3.4. CITY-ST-ZIP CITY - ST - ZIP TITLE DELETE 4.1 TITLE Change Addition 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE ☐ DELETE 5.1 TITLE Change \_\_\_ Addition NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Addition DELETE Change TITLE 6.1 TITLE 6.2 NAME NAME

6.3 STREET ADDRESS

<u> 305-173-7252</u>

14. I hereby certify that the information supplied with this filling 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.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE: