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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # 218933

(0)

RUSTY PLUMBING COMPANY OF MIAMI

Principal Plac 7310 S.W. 413 MIAMI FL 331		Mailing Address 7310 S.W. 41ST STREET MIAMI FL 33155-4504	7310 S.W. 41ST STREET					
					3	Date Incorporated or Qualified 01/07/1959	3a. Date of Last 06/12/1996	
2. Principal I	Place of Business	2a. Mailing Address			4	FEI Number		Applied For
Suite, Apt	. #, etc	Suite Apt. #, etc.				59-0900510	AA 71	Not Applicable
		97			5	. Certificate of Status Desired		Additional Required
City & Sta	te	City & State			6	. Election Campaign Financing		O May Be
23		28				Trust Fund Contribution		d to Fees
Zip 24	Country	Zip		untry	8	. This corporation has liability for in		s. 199.032,
(4)	25 9. Name and Address of Curre	29 at Registered Agent	30	 			Yes No	
ÇEI	FERTH, RUSSELL J	in negistores Agent		81 Nam		, Name and Address of New Reg	ristered Agent	
	O SW 41ST STREET							
	MI, FL			82 Stree	et Address (I	P.O. Box Number is Not Acceptab	e)	
331	= -			83				
						77		
				84 City			FL 85 Zig	o Code
olfice or agent 1 a SIGNATURE	to the provisions of Sections 607.05 registered agent, or both, in the State am familiar with, and accept the oblig	ations of Section 607.0505, Flo	orida Sta	atutes.	огрогацон в (poard of directors. Finereby accep	urpose of changing t the appointment a	its registered is registered
12.	Signature Typed as pointed name of registered as OFFICE DC AN				ure required wher		DATE	
TITLE	PD OFFICERS AN	ID DIRECTORS DELETE	13.		T''	ADDITIONS/CHANGES TO OFFIC		
NAME	SEIFERTH, RUSSELL J	L. J OCCET	1.17				L Change	Addition
STREET ADDRESS	720 TIZIANO AVENUE			IAME				
CITY - ST - ZIP	CORAL GABLES FL			STREET ADDRESS Sity-St-Zip	` [
THEE	ST	DELETE	211		 		Change	Addition
NAME	LEVY, ROSINE G.		221		1		L. J Grange	E HOOMOS
STREET ADDRESS	720 TIZIANO AVE.			TREET ADDRESS	,			
CITY-ST-ZIP	CORAL GABLES FL		- 1	CITY - ST - ZIP				ļ
TITLE		DELETE	3.1 T				☐ Change	Addition
NAME			3.2 N	AME				
STREET ADDRESS			3.3 S	TREET ADDRESS	ş			
CITY-ST-ZIP			3.4. (CITY-ST-ZIP	_			
TITLE		L DELETE	4.1 T	ITLE			☐ Change	☐ Addition
NAME			4.21	NAME				ļ
STREET ADDRESS			4.3 S	TREET ADDRESS	i			İ
CITY-ST-ZIP		The same	-	ITY-ST-ZIP				
TITLE		☐ DELETE	5.1 ₹				☐ Change	Addition
NAME OXOGO ADDROUG			5.2 N	AME				
STREET ADDRESS				TREET ADDRESS	; [
CITY - ST - ZIP TITLE		☐ DELETE		ITY-ST-ZIP				
NAME :		☐ Dereit	6.1 T				Change	Addition
OF OME			62 N	AME	1			

63 STREET ADDRESS

64 CITY-ST-ZIP 14. I do 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 conforation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

appears in Block 12 or Block 13 if

STREET ADDRESS

City-St-Zig

Jan. 17, 1997

305- 264 5531

FILED

Jan 23 1997 8:00am

Secretary of State