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

PROFIT CORPORATION ANNUAL REPORT

1997



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT # 399886** 

CHARLIE SWAIN PLUMBING, INC.

Principal Place of Business Mailing Address 8299 JOHNSON ST. 6299 JOHNSON ST. HOLLYWOOD FL 33024-5931 HOLLYWOOD FL 33024 3. Date Incorporated or Qualified Date of Last Report 04/24/1972 05/01/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-1415752 26 Not Applicable 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees  $Z_{\rm ID}$ Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes 🔲 No 25 29 30 Florida Statutes 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent SWAIN, CHARLES SCOTT SHADATA HER STIFFERTA Street Address (P.O. Box Number is Not Acceptable) 82 HIOCESTATIONICS PLX35021 3991 LAUREL OAK WAY 84 City 85 Zip Code FT.LAUDERDALE B3312 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 Stig-ature, Typied or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. TITLE DELETE 11 TITLE Change Addition SWAIN. CHARLES SCOTT 12 NAME NAME STATISTICAL PROPERTY AND A STREET 3991 LAUREL OAK WAY STREET ADDRESS 1.3 STREET ADDRESS nolkywoor xe r CITY- ST-ZIE 1.4 CITY-ST-ZIP FT.LAUDERDALE, FL 3331 DELETE Change Addition 2.1 TITLE THE GEIGER, ROBERT NAM 2.2 NAME **8701 SW 51ST COURT** 2.3 STREET ADDRESS STREET ADDRESS COOPER CITY FL CITE ST- ZIP 2. 4 City - ST-ZIP ☐ DELETE Addition 3.1 TITLE THEF SECRETARY/TREASURER ST 3.2 NAME NAME SWAIN, MARCIA S. 3.3 STREET ADDRESS STHEET ADDRESS 3991 LAUREL OAK WAY 3.4. CITY-ST-ZIP CITY - \$3 - 702 FT. LAUDERDALE, FL 33312 DELETE Addition 4.1 TITLE Change THILE 4.2 NAME NAMI

6.4 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 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 is charged by the an attachment with an address.

4.3 STREET ADDRESS

**5.3 STREET ADDRESS** 

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

51 TITLE 5.2 NAME

6.1 TITLE 6.2 NAME

SIGNATURE:

STREET ADDRESS C11Y - ST - 7)P

STREET ADDRESS

STREET ADDRESS

CHY-ST-7P

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PRINTED NAME OF SIGNING OFFICER ON WARELES SCOTT SWAIN DATE 16/97

DELETE

DELETE

-04/25/97--01007-

Change

Change

Addition

(96/6) (6)

FILED

Apr 24 1997 8:00am

Secretary of State