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

FILED Jan 23 1997 8:00am Secretary of State

1997

DOCUMENT # 492682

(0)

SEASIDE PLUMBING CO., INC.

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Principal Place of Business Mailing Address						i (noist žitis iksia isbid diša) ši	110 1107 BJ21	i mimis mener mener abbis	8)VII 1691
P O BOX 503 P O BOX 503 KEY LARGO FL 33037-7503 KEY LARGO FL 33037			0503						
						3. Date incorporated or Qua	lified \$	3a. Date of Last F	Report
						12/17/1975		07/17/1996	
2. Principal P	Place of Business	2a. Mailing Address				4, FEI Number		LA	oplied For
21		26				59-1729584			
Suite, Apt		Suite, Apt. #, etc 27			5. Certificate of Status Desired See Required				
City & State	60	City & State			6. Election Campaign Financing \$5.00 May Be				
23		28			Trust Fund Contribution L. Added to Fees				
— Zip ─────	Country	Zip	 			8. This corporation has liability for intangible tax under s. 199.032,			
24	· · · · · · · · · · · · · · · · · · ·	25 29 30). Name and Address of Current Registered Agent				Florida Statutes Yes No 10. Name and Address of New Registered Agent			
		ir vedisteren währir		81	Name	10, Name and Address of No	w Hegisi	ereo Agent	
	RGIN, PEGGY W				1441110				
	PLANTATION SHRS DR			82	Street Add	dress (P.O. Box Number is Not Acc	eptable)		
TAVI	ERNIER, FL			83					
				84	City			85 Zip	Code
					<i>-</i> ,			FL "	0000
agent Ta SiGNATURI.	m familiar with, and accept the obligation of th	er acid tille if application. (NO				ured when reinstating) ADDITIONS/CHANGES TO		DATE S AND DIRECTOR	RS IN 12
TITLE	ST	☐ DECETE 1.11		ITLE				☐ Change	☐ Addition
NAME	BURGIN, PEGGY W		1.2 N	1.2 NAME					
STREET ADDRESS	160 PLANTATION SHRS DR		1.3 9						
CITY - \$1 - ZIP	TAVERNIER, FL 00000 1.4			ITY-S	T - ZIP				
TITLE	P	OELETE 2.1						☐ Change	Addition
NAME	BURGIN, JOSEPH K			AME					
STREET ADDRESS	160 PLANTATION SHRS DR		2.3 S	2.3 STREET ADDRESS					
CITY-ST-ZIP	TAVERNIER, FL 00000	VERNIER, FL 00000 2 4			ST - ZIP		. "		
TITLE	☐ DELETE			TLE	, i			☐ Change	Addition
NAME			3.2 N	AME					
STREET ADDRESS			33\$	IREET	ADDRESS				
CITY - ST - 7(P			3.4 (11Y-S	ST-21P				
TITLE		DELETE	4171	TLE				Change	Addition
NAME			4.21	IAME					
STREET ADDRESS			4.3 S	TREET	ADDRESS				
CITY - ST - ZIP			4.4 C	ITY-S	T-ZIP				
TITLE	DELETE 5.1 T		TLE		☐ Change ☐ Addition			Addition	
NAME			52 N	AME					
STREET ADDRESS			5.3 S	TREET	ADDRESS				
CHTV+ST+ZIP		7711A-1747A-18	54 C	ITY-S	T- 2IP				
TITLF		DELETE	6.1 TI	TLE				Change	Addition
NAME			62 N	AME					
STREET ADDRESS			635	TREET	ADDRESS				
CITV-\$1.7IP				ITY-S					
14. I do hereb	by certify that the information supplied in indicated on this annual report or s	d with this filing does not qual	ify for the	өхө	mption state	ed in Section 119.07(3)(i), Florida S	tatutes. I	further certify that	the

amount of included on this armount report of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under of Lam an officer or director of the corporation or the receiver or flustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 of Block 13 if changed, or on an attachment with an address.

SIGNATURE