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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 503944

DOLPHIN PLUMBING SERVICES, INC.

(1)

FILED Feb 25 1997 8:00am Secretary of State



MIAMI FL 3317 US	ST #5-A 16	9002 SW 137 ST #5-A MIAMI FL 33176-6876 US			• Data Inc	O office	Is. Da	1 h	Donast
					3, Date inc 05/25/	orporated or Qualified 1976		e of Last 1/1996	
2. Principal Place of Business		2a. Mailing Address			4. FEI Num	ber			pplied For
21		26			59-16	683346			Not Applicable
Suite, Apt #, etc.		Suite, Apt #, etc.	Suite, Apt #, etc.		5. Certifica	5. Certificate of Status Desired \$8.75 Addition Fee Required			
City & State	e	City & State			1	Campaign Financing nd Contribution			May Be to Fees
Zφ	Country 25	Zip 29	Countr 30	у	8. This corp	poration has liability for i	ntangible t		s. 199.032,
	9. Name and Address of Curr	ent Registered Agent			10. Name a	nd Address of New Re	gistered A	gent	
	BBINS, JOANNE M		81	Name					
9007 #5-/	2 S.W. 137TH STREET A		B	Street	Address (P.O. Box)	Number is Not Acceptab	ole)		
MIAI	MI FL 33176		83						
			84	City			EI	85 Zır	Code
11. Pursuant I	to the provisions of Sections 607.0	502 and 607 1508, Florida State	ites, the above	re-named	corporation submits	this statement for the p	ourpose of	changing	its registered
agent La	registerud agent, or both, in the Sta im familiar with, and accept the obt	ligations of, Section 607.0505, F	lorida Statute	is.	poration's board of c	mectors. I neleby accep	or the appe	WIRTHE IL C	is registered
SIGNATURÉ									
	Signature Pepidate provides a electrodestered i		IIIE: Registered Ag	ent signature	required when reinstating)		DATE		
12	OFFICERS A	AND DIRECTORS	13		ADDITION	SICHANGES TO OFFIC	FRS AND	DIRECTO	RS IN 12
12. III.f	OFFICERS A	AND DIRECTORS DELETE	13. 1.1 TITLE			NS/CHANGES TO OFFIC		DIRECTO Change	
······································	PD COUCH, WILLIAM H.				PD				
TITLE NAME	PD COUCH, WILLIAM H. 9002 SW 137 ST #5-A		1.1 TITLE 1.2 NAME	T ADDAESS	PD William 1 14500 SW	1 Couch 87 CT # 141			
Trì.f	PD COUCH, WILLIAM H. 9002 SW 137 ST #5-A MIAMI FL	M DELETE	1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-	T ADDRESS	PD William A 14500 SW Miani Fl	1 Couch 89 CT # 141 - 33174		Change	Addition
TILE NAME STREET ADDRESS CISM-ST-7P TILE	PD COUCH, WILLIAM H. 9002 SW 137 ST #5-A MIAMI FL VD		1.1 TITLE 12 NAME 1.3 STREE 14 CITY- 21 TITLE	T ADDRESS ST-ZIP	PD William 1 14500 SW	1 Couch 89 CT # 141 - 33174			Addition
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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 frue 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 frustee 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.

William H. Couch