## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **FILED** PROFIT FLORIDA DEPARTMENT OF STATE Jan 23 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # 510382 (5)PEPE'S PLUMBING, INC. Principal Place of Business Mailing Address 5900 SW 42 PL BLDG 12 5900 SW 42 PL BLDG 12 **DAVIE FL 33314** DAVIE FL 33314 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/11/1976 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 59-1710397 21 26 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 Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country This corporation owes or has paid the current year Intangible 25 29 30 Personal Property Tax due June 30. 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 VALVERDE, JOSE A. 7651 SHERIDAN STREET 82 Street Address (P.O. Box Number is Not Acceptable) HOLLYWOOD FL 33024 83 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, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNAT in of registered agent and title if applicable (NOTE, Registered Agent signature regulred when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Addition 1 1 TITLE Change TITLE VALVERDE, JORGE L 1.2 NAME NAME 7651 SHERIDAN ST 1.3 STREET ADDRESS STREET ADDRESS HOLLYWOOD, FL 00000 1.4 CITY - ST-ZIP CITY-ST-ZIP PΠ DELETE Change Addition TITLE 2.1 TITLE VALVERDE, JOSE A NAME 2.2 NAME · ... 7651 SHERIDAN ST STREET ADDRESS 2.3 STREET ADDRESS HOLLYWOOD, FL 00000 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Спалде Addition 4 1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY - ST- ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS

14. I 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 if changed, or on an attachment with an address.

5,4 CiTY - ST - ZIP

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

A Down RE REQUIRED

DELETE

1-15-98 954-792-7364

Change

Addition