


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

150.00

FILED
Feb 19 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **606826** (6)
1. Corporation Name
MODERN PLUMBING INDUSTRIES, INC.



Principal Place of Business 255 OLD SANFORD-OVIEDO ROAD WINTER SPRINGS FL 32708	Mailing Address 255 OLD SANFORD-OVIEDO ROAD WINTER SPRINGS FL 32708
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country		3. Date Incorporated or Qualified 01/16/1979	4. FEI Number 59-1884437	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

**BRACCO, FRANK J
621 MORGAN STREET
WINTER SPRINGS FL 32708**

10. Name and Address of New Registered Agent

81 Name	82 Street Address (P.O. Box Number is Not Acceptable)	83	84 City	85 Zip Code
			FL	

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	
NAME	BRACCO, FRANK J	1.2 NAME	
STREET ADDRESS	255 OLD SANFORD-OVIEDO	1.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER SPRGS FL	1.4 CITY-ST-ZIP	
TITLE	VP	2.1 TITLE	
NAME	TRUHE, JOHN	2.2 NAME	
STREET ADDRESS	255 OLD SANFORD-OVIEDO	2.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER SPRGS FL	2.4 CITY-ST-ZIP	
TITLE	ST	3.1 TITLE	
NAME	VECCHIOLLA, LEONIDES	3.2 NAME	
STREET ADDRESS	255 OLD SANFORD-OVIEDO	3.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER SPRINGS FL	3.4 CITY-ST-ZIP	
TITLE	ST	4.1 TITLE	
NAME	BRACCO, SHERRIL	4.2 NAME	
STREET ADDRESS	255 OLD SANFORD-OVIEDO	4.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER SPRINGS FL	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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.

SIGNATURE

Leonides Vecchiolla

Leonides Vecchiolla

2110 100 1487 237 6000

CR2E034 (10/97)