

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 05, 2001 8:00 am
Secretary of State

03-05-2001 90289 011 ***150.00

DOCUMENT # 608746

1. Entity Name
A KUSCH PLUMBING, INC.

Principal Place of Business Mailing Address
762 NORTHLAKE BLVD. **PO BOX 12604**
PALM BCH. GARDENS FL 33410 **LAKE PARK FL 33403**

CU029490



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
13089 54th Ln. N. Suite, Apt. #, etc.

City & State City & State 4. FEI Number Applied For
West Palm Beach FL **59-1877250** Not Applicable

Zip Country Zip Country 5. Certificate of Status Desired \$8.75 Additional Fee Required
33411 **US** **\$8.75**

6. Name and Address of Current Registered Agent
KUSCH, LARRY
13760 77TH PL N
WEST PALM BEACH FL 33412

7. Name and Address of New Registered Agent
 Name: **KUSCH, LARRY W.**
 Street Address (P.O. Box Number is Not Acceptable)
13089 54th Ln. N.
 City: **WEST PALM BEACH** FL Zip Code: **33411**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. **FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State 10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KUSCH, LARRY 13760 77TH PL N WEST PALM BEACH FL 33412 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 13089 54th Ln. N. WEST PALM BEACH FL 33411
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *LARRY KUSCH* PRAS. 2/28/01 5617958797
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)