

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 645666**

1. Entity Name

RUSTY PLUMBING OF DELRAY, INC.**FILED**
Jan 31, 2000 8:00 am
Secretary of State

01-31-2000 90016 020 ***150.00

Principal Place of Business

Mailing Address

1191 S OLD DIXIE
DELRAY BEACH FL 334831191 S OLD DIXIE
DELRAY BEACH FL 33483-3467

2. Principal Place of Business

3. Mailing Address

1191 S OLD DIXIE

1191 S. OLD DIXIE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

DELRAY Bch, FL.

DELRAY Bch, FL.

Zip

Country

Zip

Country

33483

PALM Bch.

33483

PALM Bch.

4. FEI Number

59-1965205

Applied For
Not Applicable5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WARREN, RUSSELL A
15199 HARRISON ROAD
DELRAY BEACH FL FL 33484

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00.**
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State10. 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	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	PTD						
	WARREN, RUSSELL A	15199 HARRISON ROAD	DELRAY BEACH FL				
	VS						
	WARREN, PAMELA J	15199 HARRISON ROAD	DELRAY BEACH FL				
	S						
	WARREN, TIMOTHY A.	502 OSPREY DR #17-B	DELRAY BEACH FL 33444				

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: X

RUSSELL A. WARREN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-26-00 276-1011