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Mar 11 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 665091

(5)

1. Corporation Name  
CAMBRA PLUMBING, INC.

Principal Place of Business

9500 NW 79 AVE  
BAY 10  
HALEAH GARDENS FL 33018  
US

Mailing Address

1021 SW 124TH CT  
MIAMI FL 33184-2458

3. Date Incorporated or Qualified  
03/31/1980

3a. Date of Last Report  
04/15/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 932 NW 134 PL.

27 Suite, Apt. #, etc.

28 City & State

MIAMI FL.

29 Zip

Country

30

31

4. FEI Number

59-1990247

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

RODRIGUEZ, FERNANDO  
1021 SW 124TH CT  
MIAMI FL 33184

10. Name and Address of New Registered Agent

81 Name

FERNANDO RODRIGUEZ

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

932 NW. 134 PL.

83

84 City

MIAMI

FL

85 Zip Code

33182

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 new applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME RODRIGUEZ, FERNANDO  
STREET ADDRESS 1021 SW 124 CT  
CITY-ST-ZIP MIAMI FL

TITLE STD  
NAME RODRIGUEZ, ELSA  
STREET ADDRESS 1021 SW 124 CT  
CITY-ST-ZIP MIAMI FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD  
1.2 NAME RODRIGUEZ, FERNANDO  
1.3 STREET ADDRESS 932 NW 134 PL  
1.4 CITY-ST-ZIP MIAMI FL 33182

2.1 TITLE STD  
2.2 NAME RODRIGUEZ, ELSA  
2.3 STREET ADDRESS 932 NW 134 PL  
2.4 CITY-ST-ZIP MIAMI FL 33182

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CP2E034 (9/96)