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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F86192

(4)

BLOUNT PLUMBING, INC.

Principal Place of Business		Mailing Address		I 100/100 7104 ALAFO BIPAD HADID FOIRD IIDI I	}4
760 S.E. 22ND AVE. POMPANO BEACH FL 33062		760 S.E. 22ND AVE. POMPANO BEACH FL 33	062-6717		
				3. Date Incorporated or Qualified 06/22/1982	3a. Date of Last Report 02/27/1996
2. Principal Pa	ace of Business	2a. Mailing Address		4. FEI Number 59-2201059	Applied For Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.		· · · · · · · · · · · · · · · · · · ·	- \$9.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State)	City & State		6. Election Campaign Financing	\$5.00 May Be
23] Zipi	Country	28 Zip	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	8. This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032, Î Yes : \textbf{\textsize} No
	g. Name and Address of Curre	Liil L	1001	10. Name and Address of New Reg	
BLOUNT, C D			81 Name		
	S.E. 22ND AVE.		82 Street Add	iress (P.O. Box Number is Not Acceptable	le)
POM	PANO BEACH FL 33062				
			83		
			84 City		FL 85 Zip Code
11. Pursuant t	the provisions of Sections 607.05	02 and 607.1508. Florida Statu	ites, the above-named cor	poration submits this statement for the pu	rrose of changing its registered
office or re	egistered agent, or both, in the Stati in familiar with, and accept the oblig	e of Florida. Such change was	authorized by the corpora	ition's board of directors. I hereby accep	t the appointment as registered
SIGNATURE	The state of the s	gamento o , ocolion con locolo, i	iorida dialatos.		
	Signature typical or principlesank, of registered ag	y st and title if applicable (NO	TE: Registered Agent signature requ	ired when reinstating)	DATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	
TIPLE	PT Blount, C. D.	☐ DELETE	1.1 TITLE		Change Addition
NAME CONTACT ADDRESSES	760 S.E. 22ND AVE.		1.2 NAME		
STREET ADDRESS CITY: \$1-20°	POMPANO BEACH FL		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		
TITLE	DS	DELETE	2.1 TITLE		Change Addition
NAME	BLOUNT, PAMELA ANN		2.2 NAME		
STREET ADDRESS	760 S.E. 22ND AVE.		2.3 STREET ADDRESS		
CITY - ST - ZIP	POMPANO BEACH FL		2 4 CITY-ST-ZIP		•
THE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - ST - ZIP		Dottert	34. CITY-ST-ZIP		[] Observed [] 4.4.00
NAME		☐ DELETE	4.1 TITLE		Change Addition
STREET ADDRESS			4. 2 NAME		
CHTY+ST-ZIP			4.3 STREET ADDRESS 4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS		•	53 STREET ADDRESS		
CITY-ST-7-P			54 City-St-ZiP		
THEF	717	☐ DELETE	61 TITLE		Change Addition
NAME			62 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY ST 7/F	an experience of the state of t	orl milds the million of the milds	6.4 City - St - ZiP	110 07/00/0	
information Lam an of	n indicated on this annual report or	supplemental annual report is or the receiver or trustee empor	true and accurate and tha wered to execute this repo	d in Section 119.07(3)(i), Florida Statutes t my signature shall have the same legal rt as required by Chapter 607, Florida St	effect as if made under nath: that

SIGNATURE:

MATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-697 954-785-3566

FILED

Mar 11 1997 8:00am

Secretary of State