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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Corporation	MEN 1 # G50097 FLL PLUMBING, INC.	7			
Principal Place of Business Mailing Address					[(Dair) Dabe driv dave anim smit iont Ason pion dion arms substants inde
3216 15TH STREET E 3216 15TH STREET E					
BRADENTON FL 34208 BRADENTON FL 34208					
					DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed
					07/18/1983
2. Principal Place of Business 2a. Mailing Address					4. FEI Number Applied For
21	# -1-	Suite, Apt. #, etc.			59-2322060 Not Applicable \$8.75 Additional
Suite, Apt.	#, etc.	⊢	⊢ , ' ' ' '		5. Certificate of Status Desired Fee Required
22 Ciby & Stat	City & State				
City & Stat	u	⊢ '			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cou	ntrv	8. This corporation owes the current year Intangible
24	25		30		Personal Property Tax.
24	9. Name and Address of Curre		ارعوا		10. Name and Address of New Registered Agent
				81 Name	
CAMPBELL, MARY K.				00 01 14	(DO 20 N) the six Mat Assemble (S)
3216 15TH STREET, E.				82 Street Ad	ddress (P.O. Box Number is Not Acceptable)
BRA	DENTON FL 34208		ŀ	83	
	•				
				84 City	FL 85 Zip Code
office or r agent. I a SIGNATURE	Signature, typed or printed name of egistered age	ent and title if applicable. (NOTE	: Registered		ation's board of directors. I hereby accept the appointment as registered
12.		DIRECTORS /	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE .	PVD 🗸	DELETE-	1.1 TIT	le	Change Addition
NAME	CAMPBELL, LAWRENCE J.		1.2 NA	ME	
STREET ADDRESS	3216 15TH STREET E		1.3 ST	REET ADDRESS	
CITY-ST-ZIP	BRADENTON FL		_	TY-ST-ZIP	
TITLE	STD	☐ DELETE	2.1 🎞	LE	☐ Change ☐ Addition
NAME	CAMPBELL, MARY KATHLEEN		2.2 NA	ME	
STREET ADDRESS	3216 15TH STREET E		2.3 ST	REET ADDRESS	
CITY-ST-ZIP	BRADENTON FL		_	TY-ST-ZIP	Chassa C Addition
TITLE		☐ DELETE	3.1 TIT		☐ Change ☐ Addition
NAME			3.2 NA	1	
STREET ADDRESS				REET ADORESS	
CITY-ST-ZîP				TY-ST-ZIP	☐ Change ☐ Addition
TITLE		☐ DELETÉ	4.1 TIT	•	Change Addition
NAME		<u>,</u>	4. 2 NA	!	\cdot
STREET ADDRESS				REET ADDRESS	
CITY-ST-ZIP		☐ DELETE		TY-ST-ZIP	Change ☐ Addition
TITLE			5.1 TIT 5.2 NA	Į.	☐ change ☐ Audition
NAME				REET ADDRESS .	
STREET ADDRESS				reet address .	
TITLE ENGIN	12 LAND W 4.00	DELETE	6.1 TIT		☐ Change ☐ Addition
12/1/2	स्ट वस्ता है		6.2 NA		
NAME STREET ADDRESS				REET ADDRESS	·
STREET AUDRESS	1		0.00		

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, with all other like empowered.

6.4 CITY-ST-ZIP

941-748-6094