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 # H06565 1. Corporation Name AIELLO PLUMBING, INC.

(6)

FILED									
May 07 1997 8:00am									
Secretary of State									

Principal Place of Business			Mailing Address				F JODNATII ATIN MOTTE BLIDI BILIDI BILIDI BILIDI BILITI BILITI BILITI BILITI BILITI BILITI BILITI BILITI BILITI				
C/O EDWARD			C/O EDWARD AIELLO								
2212 'SW 60TH WAY			2212 SW 60TH WAY				1				
Miramar FL 33	9029	MIR	AMAR FL 33023-2944				Į		·-		
							-	3. Date Incorporated or Qualified 06/05/1984	3a. Dat 04/19	e of Last 9/1996	
2. Principal Pi	ace of Business	2a.	Mailing Address	***************************************				4. FEI Number	*****		Applied For
21		26	26				59-2415706			Not Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired			\$8.75 Additional	
22		27						5. Certificate of Status Desired	LJ	Fee	Required
City & State			City & State				6. Election Campaign Financing		\$5.0	О Мау Ве	
Zip		28						Trust Fund Contribution			d to Fees
	Country		Ζφ	Co	ountry			8. This corporation has liability for in	njangible t	ax unde	r s. 199.032,
24	25	29		30					Yes [•
1	9. Name and Address of Curre	nt Regist	ered Agent		I			10. Name and Address of New Reg	istered A	gent	
AIEU	LO, EDWARD				B1	Nani	ie				
2212	SW 60TH WAY				00	Chan	- 4 A eV el	· (D.O. Flow N. Institute in Alex Associated			
	MAR FL 33023				82	Sire	et Addres	s (P.O. Box Number is Not Acceptab	(6)		
					83						
į.											
					84	City			FL	85 Zi	p Code
44 Quecupot I	to the provinces of Sections CO7 (III	72 and 60	7 1000 Elevido Plotul	on the	ch cour		od oprope	ation submits this statement for the p		h consince	- the realistance
office or re	egistere d agent, or both, in the State	e of Florid	a. Such change was :	authoriz	ed by	/ the co	orporation	ation submits this statement for the p n's board of directors. I hereby accep	t the appo	intment	as registered
agent. La	m familiar with, and accept the oblig	jations of,	Section 607.0505, Flo	orida St	atutes	S .					
SIGNATURE											
	Signature, typed or printed name of registered ag					nt signat	ure required	when reinstating)	DATE	DIDECT	200 114 10
12.	OFFICERS AN	ALT DIREC	DELETE	13				ADDITIONS/CHANGES TO OFFIC	·	Chang	
TITLE	AIELLO, EDWARD		()((1)		TITLE				ŀ	Chang	e L Addition
NAME	2212 SW 60TH WAY				NAME						
			1.3 STREET ADDR		ADDRES	S					
CITY-ST-ZIP			CITY-S	I - 7IP							
TITLE	☐ DELETE		L DELETE	21	21 HILE				l	Chang	e 🔲 Addition
NAME			2.2 NAME								
STREET ADDRESS				2.3	STREET	ADDRES	5				
-CITY-ST-ZIP				2.4	CITY-5	ST-ZIP					
TITLE			DELETE	3.1	TITLE				[Chang	c 🔲 Addition
NAME				3.2	NAME		1				İ
STREET ADDRESS				33	S1REE1	ADDRES	s				[
CITY-ST-ZIP				3 4.	CITY - S	S1 - ZIP					
TITLE			DELETE	41	TITLE					Chang	e 🔲 Addition
NAME				4 2	NAME		1				
STREET ADDRESS				4.3	STREET	ADDRES	s]
CITY-ST-ZIP				ı	CITY-S						
i,TITLE			DELETE		THLE				I	Chang	e 🔲 Addition
:NAME			= **	- 1	NAME		1				
STREET ADDRESS						ADDRES					
• [,				
CITY-ST-ZIP			DELETE		CITY-S	1-712	+			Chang	e Addition
TITLE			L. DUICH		TITLE		1		ı	onang	o Magilian
NAME					NAME						
STREET ADDRESS				63	STREET	ADDRES	S				1
CITY-ST-ZIP					CITY-S						
14. I do hereb	ny certify that the information sumplic	ed with this	s tilina doos not auali	ty for th	a ava	motion	etatod in	Section 119 07/3)(i) Florida Statutes	I further	oodidy th	at 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.