Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 27, 1999 8:00 am Secretary of State Katherine Harris

04-27-1999 90104 048 ***150.00

DOCUMENT #	H46936
1 Corporation Name	1110000

Dringinal Diace of Business

K.L.M. PLUMBING, INCORPORATED

1 Tiricipai i Tuoc	o or Eddinioso										
% KENNETH LEE MARSH 4855 W AMELIA		% KENNETH LEE MARSH 4855 W AMELIA			DO NOT WEST IN THE		-				
ORLANDO FL 3	2808	Orlando fl 321	108				DO NOT WRITE IN THIS SPACE				
							3. Date Incorporated or Qualifed				
							03/13/1985				
2. Principal Pl	lace of Business	2a. Mailing Addr	ess				4. FEI Number	L	Apr	lied For	
21		26					59-3184387		Not	Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #	etc.				5. Certifc ate of Status Desired	\$8.	75 A	ditional	
22		27	27				5. Certificate of Status Desired	F	ee Red	uired	
City & State	e	City & State					6. Election Campaign Financing	\$5	.00.	/lay Be	
28						Trust Fund Contribution	Ac	dded to	Fees		
Zip	Country			country	/ /		8. This corporation owes the current year		ntangible		
24	25	29	30				Persor al Property Tax.	☐ Yes ☐ No			
		ss of Current Registered Agent					10. Name and Address of New Registered	Agent			
				81	N	lame					
MAR	SH, KENNETH L SR.				<u> </u>						
	TENNESSEE TERR.			82	! S	treet Ac	reet Acdress (P.O. Box Number is Not Acceptable)				
	ANDO FL 32806			83		·					
0,10	ANDO I E OEOOO			63	'[į	
				84	i c	ity		85	Zip C	ode	
					$oldsymbol{ol}}}}}}}}}}}}}}$		F	-			
office or n	egistered agent, or bo h.	ions 607.0502 and 607.1508, Flori in the State of Florida. Such chan opt the obligations of, Section 607.	ge was ∺uthori	zed by	, the	corpora	rporation submits this statement for the purpose tion's board of cirectors. I hereby accept the applications	intment	as reg	stered	
SIGNATURE											
		of registered agent and title if applicable			nt sig	nature requ	red when reinstating) DATE				
12.		FFICERS AND DIRECTORS		13.	_		ADDITIONS/CHANGES TO OFFICERS				
TITLE	PD	-	ELETE 1.	1 TITLE				□ Ch	ange	Addition	
NAME	marsh, Kenneth I		1.	2 NAME							
STREET ADDRE 3S	DORE 3S 2985 TENNESSEE TERR. 13S		1.3 STREET ADDRESS								
CITY-ST-ZIP	ORLANDO FL 32806	6	1	4 CITY-S	ST-ZIF	٠					
TITLE	VS		ELETE 2	1 TITLE				☐ Ch	ange	Addition	
NAME	MARSH, KENNETH	I .IR	2	2 NAME							
STREET ADDRE 3S	2819 AHERN DR.	2 0, 1.	2	3 STREE	T ADI	DRESS					
· ·	ORLANDO FL 32817	7	1	2. 4 City-ST-ZIP		- 1					
CITY-ST-ZIP	ONLANDO I E 32011			1 TITLE	<u> </u>			☐ Ch	ange	Addition	
				2 NAME				_	-		
NAME					A DI	DDECC					
STREET ADDRE 3S	1		1	3 STREE							
CITY-ST-ZIP				4 CITY-	SI-ZI			r Ch	anne	Addition	
TITLE		L	9	.1 TITLE		- 1			ange		
NAME				2 NAME							
STREET ADDRESS			4	3 STREE	T ADI	DRESS					
CITY-ST-ZIP				4 CITY- S	ST-ZI	2					
TITLE			8	.1 TITLE				Ch	ange	Addition	
NAME			5	2 NAME							
STREET ADDRESS			5	3 STREE	T ADI	DRESS					
CITY-ST-ZIP			5	4 CITY-S	st-ZI	ا د		_		!	
TITLE			ELETE 6	1 TITLE				☐ Ch	ange	☐ Addition	
NAME			6	2 NAME							

14. I hereby certify that the information supplied with this tiling 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 of supplemental ε naua 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 repeixer or trustee ampowered to ε xecute 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 a jother like expowered.

63 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP