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FILED
Mar 18 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 # H96561 (6)

1. Corporation Name:

HORIZON PLUMBING & MECHANICAL CONTRACTORS, INC.

Principal Place of Business:

MAX M HAGEN
3990 SHERIDAN ST. #104
HOLLYWOOD FL 33021
US

Mailing Address:

MAX M HAGEN
3990 SHERIDAN ST. #104
HOLLYWOOD FL 33021-3655
US

2. Principal Place of Business: *Horizon*

21 *Plumbing & Mechanical Contractors, Inc.*

Suite, Apt. #, etc.

22 *7070 NW 77 COURT*

City & State

23 *MIAMI, FLORIDA*

Zip

24 *33166*

Country

25 *US*

2a. Mailing Address:

Suite, Apt. #, etc.

City & State

Zip

Country

29

30

9. Name and Address of Current Registered Agent

HAGEN, MAX M.
3990 SHERIDAN ST., #104
HOLLYWOOD FL 33021

3. Date Incorporated or Qualified

01/29/1986

3a. Date of Last Report

04/23/1996

4. FFI Number

59-2630032

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

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.3508, 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 signatory, and title, if applicable.

(Both: If signatory is not a shareholder, a signature is required when a new filing is made.)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

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STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

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☐ DELETE

13.

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

President

☒ Change

☐ Addition

☐ Change

☐ Addition

Vice President

☐ Change

☒ Addition

ROBERT L. CHAPLIN

7070 N.W. 77 COURT

MIAMI, FL 33166

SECRETARY/TREASURER

☐ Change

☒ Addition

Cheeryl R. Mulet

7070 N.W. 77 COURT

MIAMI, FL 33166

☐ Change

☐ Addition

☐ Change

☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b) Florida Statutes. I further certify that the information indicated on this annual report, or a 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:

F. J. Janssen, President *F. Janssen, President* *3-3-97* *305-592-6389*

CR2E034 (9/96)