

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 26, 2001 08:00 AM**
Secretary of State**DOCUMENT # H96561**1. Entity Name
HORIZON PLUMBING & MECHANICAL CONTRACTORS, INC.**Principal Place of Business**

7070 N.W. 77 COURT

Mailing Address

3531 GRIFFIN ROAD

MIAMI FL FORT LAUDERDALE FL
33166 US 33312 US**2. Principal Place of Business**

7070 N.W. 77 COURT

3. Mailing Address

7070 N.W. 77 COURT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

MIAMI FL MIAMI FL

Zip Country Zip Country
33166 US 33166 US**4. FEI Number****59-2630032**

Applied For

Not Applicable

5. Certificate of Status Desired☐**\$8.75** Additional
Fee Required**6. Name and Address of Current Registered Agent****HAGEN, MAX M.**
3531 GRIFFIN RDFORT LAUDERDALE FL
33312 US**7. Name and Address of New Registered Agent****Name****HORIZON PLUMBING & MECHANICAL****Street Address (P.O. Box Number is Not Acceptable)**

7070 NW 77 CT

City
MIAMI

FL

Zip Code
33166

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE **CHARLENE ANN CHAPLIN****04/26/2001**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00****After MAY 1, 2001 Fee will be \$550.00****Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE ST ☐ Delete
NAME CHAPLIN CHARLENE A
STREET ADDRESS 7070 NW. 77 CT.
CITY-ST-ZIP MIAMI FL 33166TITLE ST ☒ Change ☐ Addition
NAME CHAPLIN CHARLENE A
STREET ADDRESS 7070 NW. 77 CT.
CITY-ST-ZIP MIAMI FL 33166TITLE VP ☐ Delete
NAME CHAPLIN ROBERT L.
STREET ADDRESS 7070 N.W. 77 COURT
CITY-ST-ZIP MIAMI FL 33166TITLE VP ☒ Change ☐ Addition
NAME CHAPLIN CHARLENE A
STREET ADDRESS 7070 N.W. 77 COURT
CITY-ST-ZIP MIAMI FL 33166TITLE D ☒ Delete
NAME GILLET, F. JOSEPH
STREET ADDRESS 7070 N.W. 77TH COURT
CITY-ST-ZIP MIAMI FL 33166TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE P ☐ Delete
NAME GILLET, F. JOSEPH
STREET ADDRESS 7070 N.W. 77TH COURT
CITY-ST-ZIP MIAMI FL 33166TITLE P ☒ Change ☐ Addition
NAME CHAPLIN ROBERT LPRES.
STREET ADDRESS 7070 N.W. 77TH COURT
CITY-ST-ZIP MIAMI FL 33166TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **CHARLENE ANN CHAPLIN**

VP

04/26/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)