

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J47931

(7)

1. Corporation Name
PRESTIGE PLUMBING INC.



Principal Place of Business

P.O. BOX 7584
HOLLYWOOD FL 33081
US

Mailing Address

P.O. BOX 7584
HOLLYWOOD FL 33081
US

2. Principal Place of Business

2a. Mailing Address

21

26

State, Apt. #, etc.

State, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

BEDELL, BURTON D.
4731 LINCOLN ST
HOLLYWOOD FL 33021

3. Date Incorporated or Organized
12/19/1986

3a. Date of Last Report
01/27/1995

4. FIC Number
59-2746419

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 607.0602 and 607.1508, 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 607.0606, Florida Statutes.

SIGNATURE

Signature of person authorized to execute this report

Signature of Registered Agent or other authorized person

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☐ DELETE

1.1 TITLE ☐ Change ☐ Addition

NAME
BEDELL, BURTON D.
STREET ADDRESS
4731 LINCOLN STREET
HOLLYWOOD FL

1.2 NAME

CITY, ST, ZIP

1.3 STREET ADDRESS

NAME

2.1 TITLE ☐ Change ☐ Addition

STREET ADDRESS

2.2 NAME

CITY, ST, ZIP

2.3 STREET ADDRESS

NAME

3.1 TITLE ☐ Change ☐ Addition

STREET ADDRESS

3.2 NAME

CITY, ST, ZIP

3.3 STREET ADDRESS

NAME

4.1 TITLE ☐ Change ☐ Addition

STREET ADDRESS

4.2 NAME

CITY, ST, ZIP

4.3 STREET ADDRESS

NAME

5.1 TITLE ☐ Change ☐ Addition

STREET ADDRESS

5.2 NAME

CITY, ST, ZIP

5.3 STREET ADDRESS

NAME

6.1 TITLE ☐ Change ☐ Addition

STREET ADDRESS

6.2 NAME

CITY, ST, ZIP

6.3 STREET ADDRESS

NAME

6.4 CITY, ST, ZIP

STREET ADDRESS

CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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).

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-8-96

966-2355

CR2E034 (12/95)