## 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

740 WILKIE ST.

DOCUMENT # J58082

(5)

KARLES PLUMBING, INC.

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc.

SIGNATURE:

City & State

21 740 WILKIE

724 WILKIE ST 533 MAIN STREET DUNEDIN FL 34698

Mailing Addres	s
533 MAIN STREE	
DUNEDIN FL 34	<b>698-49</b> 67
US	

28. Mailing Address

City & State

SIGNATURE REQUIRED

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED** Apr 16 1997 8:00am Secretary of State



3a. Date of Last Report

Applied For

\$8.75 Additional

Fee Required

Not Applicable

.05/01/1996

3. Date Incorporated or Qualified

5. Certificate of Status Desired

02/17/1987

59-2765442

4. FEI Number

City & State					S State ,			, ,			lection Campaign Fin		\$5.00	May Be	
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210	698 2	Country	vellas	Zip 29 3	4698	30 Cour	itry	ve/1	15		This corporation has list Florida Statutes		ble tax under t	s. 199.032,	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent															
HIGH	HAM, SANDI	RA					81	Name							
724 WILKIE ST							82	Street	Addres	s (P.	O. Box Number is Not	Acceptable)			
DUNEDIN FL 33528															
							83								
							84	City					. 85 Zip	Code	
												F	L		
11. Pursuant to the provisions of Sections 607.0502 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 607.0505, Florida Statutes.															
SIGNATURE															
12,	Signature, type: dior printed name of registered agent and title if applicable. (NOTE: Registerer OFFICERS AND DIRECTORS 13.								stered Agent signature required when reinstating)  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12						
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City-\$1-7ii*	by certify that	the informat	on supplied v	ith this filin	o does not quali	6.4 Cit fy for the 4			tated in	Sec	tion 119 07/31/i) Florid	la Statutae I fur	ther cortifu the	t the	
14. I do horeby 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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.															