

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jun 30 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # K55855 (6)
1. Corporation Name
ANTECKI PLUMBING CO. INC.

Principal Place of Business
11145 HARBOUR SPRINGS CIR
BOCA RATON FL 33428
US

Mailing Address
11145 HARBOUR SPRINGS CIR
BOCA RATON FL 33428
US




DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 40 LARNED LANE		01/05/1989	
22 City & State		27		4. FEI Number	
23 Zip		28 CECIL PARK, NEW YORK		65-0090314	
24 Country		29 14137		5. Certificate of Status Desired	
25		30 US		X \$8.75 Additional Fee Required	
				6. Election Campaign Financing	
				Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
81 ANTECKI, MARK J. 11145 HARBOUR SPRINGS CIR BOCA RATON FL 33428		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		22043 ATAMAN ST	
		83	
		84 City	
		BOCA RATON FL	
		85 Zip Code	
		33428	

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  (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSD	1.1 TITLE	ANTECKI, MARK J.
NAME	ANTECKI, MARK J.	1.2 NAME	22043 ATAMAN ST
STREET ADDRESS	11145 HARBOUR SPRINGS CIR	1.3 STREET ADDRESS	BOCA RATON, FLA 33428
CITY-ST-ZIP	BOCA RATON FL	1.4 CITY-ST-ZIP	
TITLE	VTD	2.1 TITLE	ANTECKI, LORI L.
NAME	ANTECKI, LORI L.	2.2 NAME	22043 ATAMAN ST
STREET ADDRESS	11145 HARBOUR SPRINGS CIR	2.3 STREET ADDRESS	BOCA RATON, FLA 33428
CITY-ST-ZIP	BOCA RATON FL	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	200002577962
STREET ADDRESS		4.3 STREET ADDRESS	-07/01/98--01054--052
CITY-ST-ZIP		4.4 CITY-ST-ZIP	***8.75
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	200002577962
STREET ADDRESS		6.3 STREET ADDRESS	-07/01/98--01054--051
CITY-ST-ZIP		6.4 CITY-ST-ZIP	***150.00

14. 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 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.

CR2E034 (10/97)