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

PROFIT **CORPORATION ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name " NO7571 (2) HERB'S PLUMBING MAINTENANCE, INC.											
Principal Place of Business Mailing Address								1 1984BA11 BB1 \$1101 1898B (A)(A 1988A A)	 	UIJN UN	ARI DIDILIYADI
1830 SW 81 AVE 1830 SE 81 AVE							- 1				
4109 4109											
N LAUDERDALE FL 33068 N LAUDERDALE FL 33068					068	DO NOT WRITE IN THIS SPACE					
US			US				-	3. Date Incorporated or Qualified			
Principal F	Place of Rusino	100	2a, Mailing Address					01/11/1989 4. FEI Number	— —	lan.	plied For
2. Principal Place of Business			26 Zei Maining Address					65-0105948	-		: Applicable
Sulte, Apt.	. #. etc.	·		Suite, Apt. #, etc.					\$8		dditional
22				27			1	5. Certificate of Status Desired	, , , , ,	ee Rec	
City & State				City & State				6, Election Campaign Financing	\$5	5.00	May Be
23			28						dded to		
Zip		Country	Zιp		Country	y		8. This corporation owes or has paid	the current ye	ar Inta	ingible
24	25 29				30						No
		nd Address of Curre	nt Registered Ac	jent	81	1 61		10. Name and Address of New Regis	itered Agent		
SOBRANE, HERBERT J.						Name					
1830 SE 81 AVE #4109					B2	Street A	Addres	ress (P.O. Box Number is Not Acceptable)			
N LAUDERDALE FL 33068						ļ					
					63	1					
·						City			FL 85	Zip C	ode
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statules, the a							corpor	ation submits this statement for the pure		ing its	registered
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 _											
DIGINATORE	Signature, typed o	Drinted name of registered up		: (NOI	F Registered Ag	ent signature	barit par	when reinstating)	DATE		
12.								ADDITIONS/CHANGES TO OFFICER			
TITLE	P	Ne vennent i		DELETE	1.1 TITLE				∐ Ch	ange	L. Addition │
NAME SOBRANE, HERBERT J.			•	1.2 NAME						.	
STREET ADDRESS 1830 S W 81ST AVE #410S CITY-ST-ZIP N. LAUDERDALE FL			9	1.3 STREET ADDRESS							
CITY-ST-ZIP TITLE	N. LAUI	DERDALE FL		DELETE	1.4 C(TY-ST-ZIP 2.1 TITLE				Ch	2000	Addition
NAME			'	22 NA					L (1)	anye	L Addition
STREET ADDRESS	AMBESS			2.3 STREET AD		TADDOLOG					
CITY+ST-ZIP											
TITLE				DELETE		2. 4 CITY - ST - ZIP 3.1 TITLE			☐ Ch	ange	Addition
NAME					3.2 NAME	j				-	
STREET ADDRESS					3.3 STREE	1 ADDRESS					
CITY-ST-ZIP	_				3.4. CITY-	ST-ZIP					
TITLE				DELETE	4.1 TITLE				Chi	ange	☐ Addition
NAME					4. 2 NAME						
STREET ADDRESS					4.3 STREE	T ADDRESS					
CITY-ST-ZIP	<u> </u>				4.4 C(TY-	ST-ZIP					
TITLE			· ·	DELETE	51 TITLE				□ Ch	ange	Addition
NAME					5.2 NAME						
STREET ADDRESS						ADDRESS					
CITY-ST-ZIP	ļ			DELETE	5.4 CHY-1	ST-ZIP				2000	T Addition
TITLE				DELETE	6.1 TITLE				☐ Ch	ange	Addition
NAME OTREET ADDRESS	:				6.2 NAME						
STREET ADDRESS					6.3 STREET	ADDRESS					

14. Thereby 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 cyroporation 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 all attachment with an address.

FILED

May 11 1998 8:00am

Secretary of State