## 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 # K58452

(9)

DAVE PACKARD PLUMBING, INC.

**FILED** 

Jan 30 1998 8:00am

Secretary of State

Principal Plan	a of Rucinace	Mailing Address					
Principal Place of Business Mailing Address  W. IGUN PAUL PAUL PAUL PAUL PAUL PAUL PAUL PAUL							
% John David Packard 711 IBIS Way North Palm Beach Fl 33408		% JOHN DAVID PACKARD 711 IBIS WAY NORTH PALM BEACH FL 33408			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					01/13/1989		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	. FEI Number Applied For	
21		26 420 US. HUY#1			65-0086909	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional		
22		27			Fee Required		
City & State		City & State			6. Election Campaign Financing \$5.00 May Be		
Zip Country		28 No. PARM BENZIT FLA. Zip Country					
`	<u> </u>	Zip 33408		$\mathbb{Z}_{\mathcal{A}}$ .	8. This corporation owes or has paid the current year		
24	9. Name and Address of Curre	20	30 /	. ~	Personal Property Tax due June 30. Yes  10. Name and Address of New Registered Agent	∐ No	
PACKARD, JOHN DAVID				81 Name	10. Name and Address of New Registered Agent	<del></del>	
	IBIS WAY		or realite				
	RTH PALM BCH FL 33408		82 Street Addr		dress (P.O. Box Number is Not Acceptable)	]	
NO	NITI PALMI DOTI PL 33406		83				
			ŀ	84 City	FL 85 Zi	p Code	
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the phone named corporation submits this statement for the purpose of changing 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 Signature, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent signature required when rehistating)  DATE							
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	ORS IN 12	
TITLE	PD	☐ DELETE	1.1 TIT	.E	☐ Change	e 🔲 Addition	
NAME	PACKARD, JOHN DAVID		1,2 NA	AE .			
STREET ADDRESS	711 IBIS WAY		1.3 STF	EET ADDRESS		l:	
CITY-ST-2IP	NORTH PALM BCH FL		1.4 CIT	Y-ST-ZIP			
TITLE		☐ DELETE	2.1 1111	E	Change	Addition	
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREET ADD				
CITY-ST-ZIP			2. 4 CIT	Y-ST-ZIP	* 178		
TITLE	DELETE 3.1 T		3.1 7)71	Ε	☐ Change	Addition	
NAME			3.2 NA	AE		ļ	
STREET ADDRESS			3.3 STR	EET ADDRESS			
CITY - ST - ZIP	2 11 11 11 11 11 11 11 11 11 11 11 11 11		3,4, CIT	Y-ST-ZIP			
TITLE		☐ DELETE	4.1 7178	Ε	Change	Addition	
NAME			4. 2 NA	νίΕ	·		
STREET ADDRESS			4.3 STR	EET ADDRESS			
CITY - ST - ZIP			4.4 CIT	-ST-ZIP			
TITLE		☐ DELETE	5.1 TITL	E	Change	Addition	
NAME			5.2 NAN	1E			
STREET ADDRESS			5.3 STR	EET ADDRESS		ļ	
CITY - ST - ZIP			5.4 CITY	-ST-ZIP			
TITLE		☐ DELETE	6.1 TiTL	E	Change	Addition	
NAME			6.2 NAN	E			
STREET ADDRESS			6.3 STR	ET ADDRESS		1	
CITY-ST-ZIP				-ST-ZIP			
14. I hereby co	entry that the information supplied w	with this filing does not qualify for	the exer	nption stated i	in Section 119.07(3)(i), Florida Statutes. I further certify that the	e information	