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FILED
Mar 25 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # K98306

(9)

1. Corporation Name
BEST PLUMBING COMPANY, INC.



Principal Place of Business
14853 NE 20TH AVE
N. MIAMI FL 33181

Mailing Address
14853 NE 20TH AVE
N. MIAMI FL 33181-1143

2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified
06/26/1989

3a. Date of Last Report
06/04/1996

21. State, Apt. #, etc.

26. State, Apt. #, etc.

4. FEI Number
65-0143945

Applied For
Not Applicable

22. City & State

27. City & State

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23. Zip Country

28. Zip Country

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24. Zip Country

29. Zip Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PELEG, RUBIN
18011 BISCAYNE BOULEVARD
NORTH MIAMI BEACH FL 33180

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 Zip Code

11. Pursuant to the provisions of Sections 607.0642 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 607.0605, Florida Statutes.

SIGNATURE

Signature of the person who is filing this report (if applicable)

(NOTE: Registered Agent signature required when re-appointing)

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

PVST
PELEG, RUBIN
14853 N.E. 20TH AVE.
N. MIAMI FL 33181

DELETE

1.1 TITLE

Change Addition

NAME

PELEG, RUBIN

1.2 NAME

STREET ADDRESS

14853 N.E. 20TH AVE.

1.3 STREET ADDRESS

CITY - ST - ZIP

N. MIAMI FL 33181

1.4 CITY - ST - ZIP

TITLE

D

DELETE

2.1 TITLE

Change Addition

NAME

PELEG, RUBIN

2.2 NAME

STREET ADDRESS

14853 N.E. 20TH AVE.

2.3 STREET ADDRESS

CITY - ST - ZIP

N. MIAMI FL 33181

2.4 CITY - ST - ZIP

TITLE

DELETE

3.1 TITLE

Change Addition

NAME

3.2 NAME

STREET ADDRESS

3.3 STREET ADDRESS

CITY - ST - ZIP

3.4 CITY - ST - ZIP

TITLE

DELETE

4.1 TITLE

Change Addition

NAME

4.2 NAME

STREET ADDRESS

4.3 STREET ADDRESS

CITY - ST - ZIP

4.4 CITY - ST - ZIP

TITLE

DELETE

5.1 TITLE

Change Addition

NAME

5.2 NAME

STREET ADDRESS

5.3 STREET ADDRESS

CITY - ST - ZIP

5.4 CITY - ST - ZIP

TITLE

DELETE

6.1 TITLE

Change Addition

NAME

6.2 NAME

STREET ADDRESS

6.3 STREET ADDRESS

CITY - ST - ZIP

6.4 CITY - ST - ZIP

14. I do 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 included 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

DATE (English) PHONE #

Peleg, Rubin

2/27/97 9444047

CR2E034 (9/96)