May 19, 1999 8:00 am Secretary of State

05-19-1999 90024 001 *2,100.00

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

PROFIT. CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L41911

NOB HILL GAS & WASH, INC.

Principal Plac	e of Business	Mailing A	ddress				1 10811911 911 91891	inten iffifit einer infin mente) #1911 BIBIT BIBIT BI	1811 618 11 1881
1862 N NOB H	ILL RD	% KEVIN C. COOK								
			1862 NORTH NOB HILL ROAD PLANTATION FL 33322			DO NOT WRITE IN THIS SPACE				
US PLANTATION FL 3			JN FL 33322	33322			Date Incorporated or Qualified			
							01/11/1990			
2. Principal P	Place of Business	2a. Mailin	g Address				4. FEI Number		Apr	olied For
21		26	•				65-0178827		Not	Applicable
Suite, Apt.	#, etc.		Apt. #, etc.					Desired []	\$8.75 A	dditional
22		27					5. Certifcate of Status	Desired	Fee Rec	quired
City & Star	te	City 8	State				6. Election Campaign I	Financing	\$5.00	May Be
23		28					Trust Fund Contribu	tion	Added to	Fees
Zip	Country	Zip		Cou	ntry		8. This corporation ow	es the current year l		_
24	25	29		30			Personal Property T			□No
	9. Name and Address of Curren	t Registered A	Agent		041	Ni	10. Name and Address	s of New Registere	d Agent	
000	TELLO IAMES I I				81	Name				
COSTELLO, JAMES J J				82	Street Ad	ldress (P.O. Box Number is N				
700 NW 100TH TERR PLANTATION FL 33324							- <u>-</u>		- -	·
PLA	MIATION PL 33324				83					
					84	City			85 Zip C	ode
		_			Ш	. 		<u> </u>	<u> </u>	
11. Pursuant	to the provisions of Sections 607.050 registered agent, or both, in the State	2 and 607.150 of Florida, Suc	8, Florida Stat h change was	utes, the a	bove 1 bv 1	-named co the corpora	rporation submits this statem ation's board of directors. I he	ent for the purpose of reby accept the app	ointment as rec	registerea gistered
agent. I a	m familiar with, and accept the obliga	tions of, Section	n 607.0505, F	lorida Stati	utes.					
SIGNATURE										
40	Signature, typed or printed name of registered ager OFFICERS AN			TE: Registered	Agent	t signature requ	and when reinstating) ADDITIONS/CHANGI	DATE	AND DIRECTO	RS (N. 12
TITLE	T	DURECTOR	DELETE	1.1 Ti	n F	,	ADDITIONS/CHANGI	LO TO OTTICENO P	Change	Addition
) DV Cook, Kevin C			1.2 N/						
NAME	**** NORTH NORTH BOAR					ADDRESS				•
STREET ADDRESS	1									
CITY-ST-ZIP TITLE	PLANTATION FL 33322		DELETE	2.1 TD	TY-51	- 217				
	1 = 1				ΠE					Addition
NAME	COSTELLO, JAMES J J.C.			1		-			Change	Addition
STREET ADDRESS	10261 W BREWARD BLVD PLANTATION FL 33324			2.2 N/	AME	ADDRESS			Change	Addition
CITY-ST-ZIP	I PLANTATION FL 33324			2.2 NV 2.3 ST	AME TREET	ADDRESS			☐ Change	Addition
TITLE		<u> </u>	∏ DELETE	2.2 N/ 2.3 ST 2.4 C	AME TREET ITY-5]	- 1				☐ Addition
NAME EXPECT ADDRESS	DT	<u> </u>	☐ DELETÉ	2.2 N/ 2.3 S1 2.4 C 3.1 TI	AME TREET ITY-5] TLE	- 1			☐ Change	
STREET ADDRESS	DT MILLER, JEREL		☐ DELETÉ	22 N/ 2.3 ST 2.4 C 3.1 TT 32 N/	ame Treet ITY-51 Tle Ame	T-ZIP				
CITY-ST-ZIP	DT MILLER, JEREL 1862 NORTH NOB HILL ROAD	<u> </u>	DELETÉ	2.2 NV 2.3 ST 2.4 C 3.1 TT 3.2 NV 3.3 ST	AME TREET TITY-ST TILE AME TREET	T-ZIP ADDRESS				
	DT MILLER, JEREL 1862 NORTH NOB HILL ROAD PLANTATION FL)		22 NV 2.3 ST 2.4 C 3.1 TT 32 NV 3.3 ST 3.4. C	AME TREET TLE AME TREET	T-ZIP ADDRESS				
TITLE	DT MILLER, JEREL 1862 NORTH NOB HILL ROAD PLANTATION FL DS)	DELETÉ	22 NV 23 ST 2.4 C 3.1 TT 32 NV 3.3 ST 3.4. C 4.1 TT	AME TREET TLE AME TREET TTY-ST	T-ZIP ADDRESS			☐ Change	☐ Addition
TITLE NAME	DT MILLER, JEREL 1862 NORTH NOB HILL ROAD PLANTATION FL DS COSTELLO, JAMES J., SR.			22 N/ 23 ST 2.4 C 3.1 TF 32 N/ 3.3 ST 3.4. C 4.1 TF 4.2 N/	AME TREET TLE AME TREET TY-ST TLE AME TREET TLE AME	T-ZIP ADDRESS T-ZIP			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS	DT MILLER, JEREL 1862 NORTH NOB HILL ROAD PLANTATION FL DS COSTELLO, JAMES J., SR. 1862 NORTH NOB HILL ROAD			22 N/ 23 ST 2. 4 C 3.1 TF 32 N/ 3.3 ST 3.4. C 4.1 TF 4.2 N/ 4.3 ST	AME TREET TLE AME TREET TTY-ST TLE AME TREET	T-ZIP ADDRESS T-ZIP ADDRESS			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT MILLER, JEREL 1862 NORTH NOB HILL ROAD PLANTATION FL DS COSTELLO, JAMES J., SR. 1862 NORTH NOB HILL ROAD PLANTATION FL		OELETE	22 NV 2.3 ST 2.4 C 3.1 TT 3.2 NV 3.3 ST 3.4. C 4.1 TT 4.2 N 4.3 ST 4.4 CI	AME TREET TLE AME TREET TLE AME TREET TLE AME TREET TY-ST	T-ZIP ADDRESS T-ZIP ADDRESS			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DT MILLER, JEREL 1862 NORTH NOB HILL ROAD PLANTATION FL DS COSTELLO, JAMES J., SR. 1862 NORTH NOB HILL ROAD PLANTATION FL VP			22 N/ 23 ST 2. 4 C 3.1 TF 32 N/ 3.3 ST 3.4. C 4.1 TF 4.2 N/ 4.3 ST	AME TREET TILE AME TREET TITLE TREET TITLE TREET TY-ST TITLE	T-ZIP ADDRESS T-ZIP ADDRESS			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	DT MILLER, JEREL 1862 NORTH NOB HILL ROAD PLANTATION FL DS COSTELLO, JAMES J., SR. 1862 NORTH NOB HILL ROAD PLANTATION FL VP MATTHEW, MASHBURN)	OELETE	22 NV 2.3 ST 2.4 C 3.1 TT 32 NV 3.3 ST 3.4. C 4.1 TT 4.2 N 4.3 ST 4.4 CI 5.1 TT 5.2 NV	AME TREET TLE AME TREET TREET TLE AME TREET TLE TREET TY-ST TLE AME	T-ZIP ADDRESS T-ZIP ADDRESS			☐ Change	☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT MILLER, JEREL 1862 NORTH NOB HILL ROAD PLANTATION FL DS COSTELLO, JAMES J., SR. 1862 NORTH NOB HILL ROAD PLANTATION FL VP MATTHEW, MASHBURN 1862 NORTH NOB HILL ROAD PLANTATION FL)	OELETE	22 NV 2.3 ST 2.4 C 3.1 TT 32 NV 3.3 ST 4.4 CI 5.1 TT 5.2 NV 5.3 ST 5.4 CI 6.1 TT 6.2 NV	AME TREET TITY-ST TILE AME TREET TITY-ST TILE AME TREET TY-ST TILE TY-ST TILE TY-ST TILE AME TY-ST TILE AME	T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS			☐ Change	Addition Addition

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 odd of 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 odd of 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.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

TED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/98)