FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

L59363

(6)

DOCUMENT # 1. Corporation Name

LEIGH CLARK PLUMBING, INC.

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Principal Place of Business Mailing Address						
2700 NORTHEAST 23RD COURT POMPANO BEACH FL 33062 US		2700 NORTHEA Pompano bea US	IST 23RD COURT ICH FL 33062			
		US		3. Date incorporated or Qualified 03/22/1990	3a. Date of Last Report 03/21/1995	
2. Principal Pla	ice of Business	2a. Mailing Address	3	4, FEI Number	Applied For	
21		26		65-0177933	Not Applicable	
Suite, Apt. #		Suite, Apt #, e		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees	
Zip	Country	28	Country	This corporation has liability for		
24	25	29	30		No	
	g. Name and Address of Currer			10. Name and Address of New I	Registered Agent	
210 Ut	NE, MICHAEL E. NIVERSITY DRIVE, SUITE 707 L SPRINGS FL 33071		82 Street Add 900 C 83	dress (P.O. Box Number is Not Acceptat なてぬなせ していこ	Suite 602	
			Ft.	au derdale	FL 99334	
or registers	o the provisions of Sections 607.050/ ed agont, or both, in the State of Flori h, and accept the obligations of, Sec	da. Such change was au	thorized by the corporation's bo	oration submits this statement for the pu and of directors. Thereby accept the app	irpose of changing its registered office jointment as registered agent. I am	
	Signating hypercorporated name of registered agin		(No.11) Bugistered Agent signature requi		DAIL	
12. TITLE	PD OFFICERS AS	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	TICERS AND DIRECTORS IN 12 Change	
NAME	CLARK, LEIGH	[_] toucen			***	
STREET ADDRESS	1498 SW 19 STREET		1 3 CIDEUT ADDGGGG	1700 N.E. 23rd Con	urt	
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY-ST-ZIP P	ompano Beach, FL	33062	
TritE		☐ DELETI	2 1 TITLE		Change Addition	
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY ST ZIP			2.4 CITY - ST. ZIP			
TITLE		DELET-	E 3 1 TITLE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
C(TY-ST-Z(P		Clouct	3.4 C(1) Y · S1 · Z(P		Change Addition	
TITLE		DELET	1		Charge D Asoliton	
NAME CARREL ADDRESS			4.2 NAME 4.3 STREET ADDRESS			
STREET ADDRESS						
CITY-ST-ZIP TITLE		DELET	4.4.CTTY - ST - ZIF' E 5.1.TTLE		Charige Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CHTY-ST-ZIP			5.4 CITY - ST - 7 iP			
TIFLE		DELET			Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6 4 CITY - ST - ZIP			
	ov certify that the information supplied	with this filing is voluntar	ily furnished and does not qualify	for the exemption stated in Section 119	9.07(3)(k), 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 stated in Section 119.07(3)(k), Florida Statutes. Hurther 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 consoration 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 is chapted, or oat attachment with an address.

SIGNATURE

LEIGH CLARK