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

**PROFIT** CORPORATION ANNUAL REPORT

1999

1. Corporation Name

DOCUMENT # **L72438** 



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## FILED May 07, 1999 8:00 am Secretary of State

05-07-1999 90177 042 \*\*\*150.00

GEORGE	e's plumbing services,	INC.					
Principal Place	e of Business	Mailing Address				MINIT NIGHT DIEN NIGHT B	1831 81911 1881
61 COCO PLUM DRIVE 61 COCO PLUM DRIVE UNIT F MARATHON FL 33050 US US					DO NOT WRITE IN  3. Date incorporated or Qualifed	THIS SPACE	<del></del>
00					05/11/1990		
Principal Place of Business     2a. Mailing Address					4. FEI Number	Ap	plied For
21	26				65-0202168		t Applicable
Suite, Apt.	#, etc. Suite, Apt. #, etc. 27				5. Certifcate of Status Desired	\$8.75 A Fee Re	
City & State	State City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added t	- 1
Zip	Country Zip Country 25 29 30				This corporation owes the current yes     Personal Property Tax.	X Yes	□No
Name and Address of Current Registered Agent					10. Name and Address of New Regis	tered Agent	
CENNED I D				Name	NA		
FENNER, J P 11400 OVERSEAS HWY			82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
STE 224			83				
MARATHON FL 33050						FL 85 Zip C	Code
office or n	to the provisions of Sections 607.050 egistered agent, or both, in the State im familiar with, and accept the obliga	of Florida, Such change was author	onzed by	the corporatio	oration submits this statement for the purpoin's board of directors. I hereby accept the	se of changing its appointment as re-	registered gistered
SIGNATURE		NA	711	nt signature required	(when savetating)	ATE	
12.	Signature, typed or printed name of registered age	ND DIRECTORS	13.	at signatore required	ADDITIONS/CHANGES TO OFFICE		PRS IN 12
TITLE	-		1.1 TITLE			Change	Addition
NAME	UPPERMAN, GEORGE W 12N		1.2 NAME				
STREET ADDRESS	112 121 21 21 21 21		1.3 STREET	TADDRESS			
CITY-ST-ZIP			1.4 CITY-S	T-ZIP		[] Change	Addition
TITLE	5.		2.1 TITLE			Change	☐ Addition
NAME STREET ADDRESS	ALCOHOL OT OTHE		2.2 NAME 2.3 STREET	TADDRESS			Ì
CITY-ST-ZIP	111017101151		2.4 CITY-5				
TITLE			3.1 TITLE			☐ Change	☐ Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET	TADDRESS			
CITY-ST-ZIP			3.4. CITY- S	ST-ZIP		☐ Change	Addition
TITLE	_		4.1 TITLE 4.2 NAME			спанув	
NAME STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP	time and and mark m		4.4 CITY-S				
TITLE			5.1 TITLE			Change	☐ Addition
NAME			5.2 NAME				
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP			5.4 CITY-S' 6.1 TITLE	T-ZIP		Change	Addition
TITLE		☐ DELETE	6.1 TITLE			Change	□ Addition

CITY-ST-ZIP 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 address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS