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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M25050

AMC PLUMBING CORPORATION

(9)

FILED Aug 12 1997 8:00am Secretary of State



	e of Business	Malling Address	·						B1841 (BB1
BOO W. 85TH TERRACE 500 W. 65TH TERRACE HIALEAH FL 33012-6644									
						3. Date Incorporated or Qualified 12/24/1985	3a. Date of Last Report 06/19/1996		
2. Principal F	Place of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number Applied For			
21		26	26			59-2639903 Not Applicab			ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional			
City & Stat	-	27				Fee Required			
l City of Grai	te	City & State	City & State			6. Election Campaign Financing \$5.00 May Be			
23 Zip		28	+			Trust Fund Contribution			
Zip 24		Country Zip Co			This corporation has italisity for intanglate tax bilder 3: 155:552				
24	[25] 9. Name and Address of Curre	29	30			Florida Statutes Yes No 10. Name and Address of New Registered Agent			
ADD	ERA, LUIS O	air vaðistatan viðatit		81 N	Name	IV. Name and Address of New Rej	Jistereu A	jent	
	W. 65TH TERRACE			,					
	EAH FL 33012		82 Street Ad			dress (P.O. Box Number is Not Acceptable)			
ווית	ENT PL 00012		83						
			Ľ						
No. 1			1	84 (City		FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statut	es, the ab	ove-n	amed corp	poration submits this statement for the p lion's board of directors. I hereby accep		hanging i	ts registered
agent la	m familiar with, and accept the obli	gations of, Section 607.0505, Fk	orida Statu	ites.	e corporat	noirs board of directors. Thereby accep	t trie appoi	iimeni as	registered
SIGNATURE									
Signature, typed or printed name of registered agent and little if applicabile (NOTE Registe					ignature requir	red when reinstating)	DATE		
12.	OFFICERS AF	ND DIRECTORS DELETE		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND I		
TITLE	ARRIERA, LUIS O	T") DETERE	1.1 1110				L	Change	☐ Addition
NAME	EAN IN PETH TEDD			1.2 NAME					1
STREET ADDRESS	JIAI CAU CI			1.3 STREET ADDRESS 1.4 CITY-ST-ZIP					
CITY-ST-ZIP TITLE	PAR	DELETE			P		r	Change	Addition
NAME	RIERA, LUIS O			2.1 TITLE 2.2 NAME				_ Onlange	
STREET ADDRESS	500 W 65TH TERR			2.3 STREET ADDRESS					
CITY-ST-ZIP	HIALIAH FL	TANK CI		2.4 CITY-ST-ZIP					
TITLE	VP	2.71			ur		Г	Change	Addition
NAME	ADDICOA OLADVO			3.2 NAME			L.	v	
STREET ADDRESS	500 W 65TG TERR			3 STREET ADDRESS					
CITY-ST-ZIP	HIALEAH FL			Y-ST-Z	•				
TITLE		DELETE	4.1 TITL				ſ	Change	Addition
NAME		-	4. 2 NA				_	· •	
STREET ADDRESS				EET ADD	DRESS				
CITY-ST-ZIP			4.4 CITY - S		- '				
TITLE		DELETE	5.1 TITL		-			Change	Addition
NAME			5.2 NAM		.]		_	-	
STREET ADDRESS			5.3 STR		DRESS				}
CITY-ST-ZIP			5.4 CITY		1				j
TITLE		DELETE	61 TITL					Change	Addition
NAME			62 NAN	A E			_	-	
STREET ADDRESS			63 STR		DRESS				
CITY-ST-ZIP		•	6.4 C(T)		l l				

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 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 12 if chapter 6, or open an attachment with an address.