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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

## **FILED** Mar 13 1998 8:00am Secretary of State

P92000001493 (5) DOCUMENT # METROPOLITAN PLUMBING, INC. Principal Place of Business Mailing Address 6250 SW 16TH 6250 SW 16TH MIAMI FL 33155 MIAMI FL 33155 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/03/1992 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 65-0382629 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 Country Zιρ 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent R1 Name **GUIARDINU, MIGUEL S** 6250 SW 16TH ST. 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33155** 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 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. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTL: Registered Agent signature required when re-instating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE GUIARDINU, MIGUEEL S Guiardinu, Miguel NAME 1.2 NAME 9615 CORAL WAY 6250 S.W. 16th St. STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33165** CITY - ST - 7IP 1.4 CITY-ST-ZIP Miami, FL 33155 DELETE Addition 2.1 TITLE TITLE RODRIGUEZ, SIGILFREDO P 2.2 NAME NAME 9615 CORAL WAY 2.3 STREET ADDRESS STREET ADDRESS MIAMI FL 33165 CITY-ST-ZIP 2. 4 CITY-ST-ZIP ☐ Addition DELETE 3.1 TITLE ☐ Change TITLE 32 NAME NAME STREET ADDRESS 33 STREET ADDRESS 3 4. CITY-ST-ZIP CITY-ST-ZIP DELETE Addition Channe TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-7IP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME **6 3 STREET ADORESS** STREET ADDRESS CITY-ST-ZIP

14. Thereby 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 suppliemental 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 attachnost with an address.

SIGNATURE:

\*\*President\*\* 3/1/9 8\*\*