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

PROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

FILED

Mar 09 1998 8:00am

Secretary of State

Şandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P93000013603 (4)

STEVE'S PLUMBING SERVICE INC. Principal Place of Business Mailing Address 3855 N.E. 12 AVE 3855 NE 12 AVE POMPANO BEACH FL 33064 POMPANO BEACH FL 33064 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/15/1993 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 21 26 65-0391050 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 26 Žip Country 8. This corporation owes or has paid the current year Intangible ☐ Yes 24 25 29 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name KORELISHN. DEBRA 3440 N.E. 13TH AVE. 82 Street Address (P.O. Box Number is Not Acceptable) POMPANO BEACH FL 33064 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstaling) CR2E034 (10/97 OFFICERS AND DIRECTORS 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition 1.1 TITLE THILE KOREUSHN, STEPHEN J 1.2 NAME NAME STREET ADDRESS 3440 NE 13 AVE 1.3 STREET ADDRESS CITY-ST-ZIP POMPANO BCH FL 1.4 CITY-ST-ZIP DELETE Addition TITLE 2.1 TITLE NAME KORELISHN, DEBRA 22 NAME 3440 NE 13 AVE STREET ADDRESS 2 3 STREET ADDRESS POMPANO BCH FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELÉTE Change Addition TITLE 3 1 T/T) F KORELISHN, CRYSTAL 3.2 NAME STREET ADDRESS 3440 NE 13 AVE 3.3 STREET ADDRESS POMPANO BOH FL CITY-ST-ZIP 3.4. CHTY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE KORELISHN, STEPHEN JR 4. 2 NAME NAME STREET ADDRESS 3440 NE 13 AVE 4.3 STREET ADDRESS POMPANO BCH FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition TITLE 51 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 City-St-ZIP CITY-ST-ZIP DELETE Addition 6.1 TITLE ☐ Change 6.2 NAME STREET ADDRESS 63 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 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 except this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or at a the finite ment with an address.

SIGNATURE:

SIGNATURE: