

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 19, 2004 8:00 am**  
**Secretary of State**

04-19-2004 90253 049 \*\*\*150.00

DOCUMENT # P93000013914

1. Entity Name

PAPA'S PLUMBING, INC.



Principal Place of Business

3971 BLACK FOREST CIR  
BOYNTON BEACH FL 33436

Mailing Address

3971 BLACK FOREST CIR  
BOYNTON BEACH FL 33436

2. Principal Place of Business

4734 Meadow Green Trail

Suite, Apt. #, etc.

3. Mailing Address

4734 Meadow Green Trail

Suite, Apt. #, etc.



MOORE

CR2E034 (11/03)

City & State

Lake Worth FL

City & State

Lake Worth FL

4. FEI Number

65-0395404

Applied For

Not Applicable

Zip

33463 6979

Country

USA

Zip

33463 6979

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

KOVARNIK, EDWARD

~~3971 BLACK FOREST CIR~~  
~~BOYNTON BEACH FL 33436~~

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

4734 Meadow Green Trail

Lake Worth

FL

Zip Code  
33463 6979

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Edward Kovarnik DP

Edward Kovarnik

4/15/04

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2004 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DP  
KOVARNIK, EDWARD  
3971 BLACK FOREST CIR  
BOYNTON BEACH FL

TITLE ☐ Delete

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
S  
TIPPETT, HENRY  
291 MENTONE RD  
LAKE WORTH FL 33462

TITLE ☐ Delete

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
T  
PLEASANT, MICHAEL  
1008 MACY STREET  
WEST PALM BEACH FL 33405

TITLE ☐ Delete

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete

NAME  
STREET ADDRESS  
CITY-ST-ZIP



11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
4734 Meadow Green Trail  
Lake Worth FL 33463-6979

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Edward Kovarnik DP

Edward Kovarnik

4/15/04 261-514-8878

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #