

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

DOCUMENT # **P93000062809 (7)**

1. Corporation Name

**KUZNİK SPRINKLERS, INC.**

MAY 1 10:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
**1900 NORTHWEST 107TH AVENUE  
PEMBROKE PINES FL 33026**

Mailing Address  
**1900 NORTHWEST 107TH AVENUE  
PEMBROKE PINES FL 33026**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **09/09/1993** 3a. Date of Last Report **08/17/1994**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

28 Zip

24 Country

29 Country

25

30

4. FEI Number **65-0435335** Applied For  Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

6. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No *Sub Chaps 5*

9. Name and Address of Current Registered Agent

**KUZNİK, DIANE  
1900 NORTHWEST 107TH AVENUE  
PEMBROKE PINES FL 33026**

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City **FL** 85 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 agent or branch 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

(Signature of Current Registered Agent, applicable only if changing agent)

(Signature of New Registered Agent, applicable only if changing agent)

1541

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12.1 NAME **PD KUZNİK, THOMAS JR. 1900 NORTHWEST 107TH AVENUE PEMBROKE PINES FL 33026**

12.2 NAME **VD KUZNİK, THOMAS III 1900 NORTHWEST 107TH AVENUE PEMBROKE PINES FL 33026**

12.3 NAME **STD KUZNİK, DIANE 1900 NORTHWEST 107TH AVENUE PEMBROKE PINES FL 33026**

12.4 NAME

12.5 NAME

12.6 NAME

12.7 NAME

12.8 NAME

13.1 TITLE  Change  Addition

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY, ST, ZIP  Change  Addition

13.5 TITLE  Change  Addition

13.6 NAME

13.7 STREET ADDRESS

13.8 CITY, ST, ZIP  Change  Addition

13.9 TITLE  Change  Addition

13.10 NAME

13.11 STREET ADDRESS

13.12 CITY, ST, ZIP  Change  Addition

13.13 TITLE  Change  Addition

13.14 NAME

13.15 STREET ADDRESS

13.16 CITY, ST, ZIP

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.032(1), Florida Statutes. I further certify that the information indicates I am the current 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 199, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or as an attachment with an address.

SIGNATURE: *Thomas Kuznik*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-95 305433 1104