FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
95 JAN 20 AM 9:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000000973 (5)**

1. Corporation Name
MUELLER DISTRIBUTION CONTRACTORS, INC.

600001393146
-01/30/95--01067--010
****208.75 ****208.75

DO NOT WRITE IN THIS SPACE.

Principal Place of Business	Mailing Address
7381 S.W. 6TH COURT PLANTATION FL 33317	7381 S.W. 6TH COURT PLANTATION FL 33317

3. Date Incorporated or Qualified: 01/05/1994
3a. Date of Last Report: 1/5/94

2. Principal Place of Business 21	2a. Mailing Address 26	4. FEI Number: 65-0525745	☐ Applied For ☐ Not Applicable
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	5. Certificate of Status Desired ☒X	$8.75 Additional Fee Required
City & State 23	City & State 28	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
Zip 24 / Country 25	Zip 29 / Country 30	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
MUELLER, JAMES H 7381 S.W. 6TH COURT PLANTATON FL 33317	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 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1.1 TITLE	President	☐ Change ☐ Addition
NAME	MUELLER, JAMES H	1.2 NAME	MUELLER, James H.	
STREET ADDRESS	7381 SW 6TH COURT	1.3 STREET ADDRESS	7381 S.W. Sixth Court	
CITY-ST-ZIP	PLANTATION FL 33317	1.4 CITY-ST-ZIP	Plantation, Florida 33317	
TITLE	D	2.1 TITLE	Secretary	☐ Change ☐ Addition
NAME	WALKER, KAY	2.2 NAME	WALKER, Kay	
STREET ADDRESS	2211 NOVA VILLAGE DRIVE	2.3 STREET ADDRESS	2211 Nova Village Drive	
CITY-ST-ZIP	DAVIE FL 33317	2.4 CITY-ST-ZIP	Davie, Florida 33317	
TITLE		3.1 TITLE	Vice-President	☐ Change ☐ Addition
NAME		3.2 NAME	KRUPINSKI, Joseph	
STREET ADDRESS		3.3 STREET ADDRESS	8895 West Sunrise Boulevard	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Plantation, Florida 33322	
TITLE		4.1 TITLE	Vice-President	☐ Change ☐ Addition
NAME		4.2 NAME	SELDEN, Randolph B.	
STREET ADDRESS		4.3 STREET ADDRESS	658 Luna Court	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Jacksonville, Florida 32205	
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

1-20 RC

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 13 if changed, or on an attachment with an address.

SIGNATURE: Kay Walker Secretary January 18, 1995 (305) 885-4107
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL WITH AUTHORITY TO SIGN ON BEHALF OF CORPORATION Date Daytime Phone #

0227128 CP