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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400032770 (7)

COGGINS PLUMBING NORTH, INC.

COGGINS, SANDRA

RIVERVIEW FL 33511

COGGINS, ANDREW

RIVERVIEW FL 33511

807 WESTBROOK AVENUE

807 WESTBROOK AVENUE

NAME

TITLE

NAME

TITLE NAME

TITLE NAME

TITLE

STREET ADDRESS

STREET ADDRESS

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STREET ADDRESS DITY-ST-ZIP

STREET ADDRESS

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CITY-ST-ZIP

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Principal Place of Business Mailing Address								
7817 COMM RIVERVIEW	ERCE STREET FL 33569	7817 COMMERCE STREET RIVERVIEW FL 33569-4391						
						3. Date Incorporated or Qualified 04/28/1994	3a. Date of Last Report 04/17/1996	
2. Principal	Place of Business	2a. Mailing Address				4. FEI Number	Applied For	
21		26				59-3240893	Not Applicable	
Suite, Ap 22	ot. #, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & St	tate	City & State				Election Campaign Financing Trust Fund Contribution	\$5.00 May Be	
23 Zip	Country	28 Zp	'(p) Country			8. This corporation has liability for in	7,0000,10,000	
24	 	25 29 30		Country	Florida Statutes		Yes No	
9. Name and Address of Current Registered Agent				<u> </u>		10. Name and Address of New Registered Agent		
COGGINS, CHARLES T SR. 807 WESTBROOK AVENUE BRANDON FL 33511				81	81 Name 82 Street Address (P.O. Box Number is Not Acceptable)			
				1	otroet Address (1.0. box Address is Not Address)			
 -				83				
				84	City		FL 85 Zip Code	
office o	nt to the provisions of Sections 607 or registered agent, or both, in the S Lam familiar with, and accept the o	State of Florida. Such chang	e was autho	orized by	the corpora	poration submits this statement for the pu ation's board of directors. I hereby accept	rpose of changing its registered the appointment as registered	
SIGNATUR	El Signature, typical or printed name of registers	ed agent and title if applicable	(NOTE Rec	gistered Age	ent signature requ	pired when reinstating)	DATE	
12.	OFFICERS	AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICE		
TITLE	D	☐ D£L.	DELETE 1.11				Change Addition	
NAME	AE COGGINS, CHARLES T SR. 1.2			1.2 NAME				
STREET ADDRESS 807 WESTBROOK AVENUE 1.3			1.3 STREET	ADDRESS				
C(1Y-ST-ZIP	City-St-ZiP RIVERVIEW FL 33511 1.4			1.4 CITY - S	IT-ZIP			
Table	h	DEL	ETE	2.1 TITLE	I		☐ Change ☐ Addition	

22 NAME

31 TITLE

32 NAME

4.1 TITLE

4.2 NAME 4.3 STREET ADDRESS

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

DELETE

2 3 STREET ADDRESS

33 STREET ADDRESS

3.4. CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

2 4 CITY-ST-ZIP

14. I do 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 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 applications (Florida Statutes).

SIGNATURE: (Males 1 Cos OS CHARLES 7 Coggins SA 1-17-57 813-67-583)

R2E034 (9/96)

Addition

Addition

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Addition

Change

Change

Change

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FILED

Jan 27 1997 8:00am

Secretary of State