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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P94000036070 (8)

B & F PLUMBING OF STUART, INC.

## **FILED** Mar 03 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						( 125/100) (18 1911 5781 9811 9911 4011 4011)	INNO WITH CORFE FOR	611 8611 (8 PI	
8040 SE COLONY DRIVE 8040 SE COLONY DRIVE			٧É						
STUART FL 3	1997	STUART FL 34997				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified 05/12/1994			
2 Principal Pl	ace of Business	2s. Mailing Address				4. FEt Number	IAI	oplied For	
21		26				65-0551834	_ <del>                                    </del>	ot Applicable	
Suite, Apt.	, etc.	Suite, Apt. #, etc.			-	_	\$8.75	Additional	
22		27				5. Certificate of Status Desired	Fee Re	equired	
City & State		City & State				6. Election Campaign Financing	\$5.00	May Be	
23		28				Trust Fund Contribution	Added	to Fees	
Zip				Country 8, This corporation owes or has paid the current year Intangible					
24	25	29	30	r		Personal Property Tax due June 30.  10. Name and Address of New Registere			
	9. Name and Address of Currer	it negistered Agent		81	Name	10. Hame and Address of New Hegistere	u Agent		
INGRAM, WILLIAM T SR. 11130 SE FEDERAL HWY									
	BE SOUND FL 33455			82	Street Addi	Address (P.O. Box Number Is Not Acceptable)			
				83					
				84	•	F	┗▕▕▕	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 Signature, lyced or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE									
					nt signature requi	red when reinstating)  ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	2S IN 12	
TITLE	P	DELETE	13. 1.1 T	TLE		ADDITIONO/OFFARGES TO OFFIGERS A	Change	Addition	
NAME	BURGER, MARTIN K	_	1.2 N				-		
STREET ADDRESS	8040 SE COLONY DRIVE		1,3 S		ADDRESS			1	
CITY-ST-ZIP	STUART FL 34997		1.4 (		T- ZIP			-	
TITLE		DELETE 2.1					Change	☐ Addition	
NAME			2.2 N	AME					
STREET ADDRESS			2.3 \$	2.3 STREET ADDRESS				}	
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NAME			3.2 N	AME					
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NAME			4.2 N		1			[	
STREET ADDRESS					ADDRESS			ŀ	
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NAME			5.2 N		1000000				
STREET ADDRESS					ADDRESS				
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TITLE		C. PICCIL	6.2 N				J.III.Ig0		
NAME CTREET ADDRESS					ADDRESS				
STREET ADDRESS									
CITY-ST-ZIP		tal at the state of the state o	0.4 U	TY-\$1		Cooling 110 07/3/3) Elevide Statutes 1 further	and to that the	information	

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 informatio 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 13 if changed, or on an attachment with an address.

Bungar HARAMATA

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561 283-7895