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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARIMENT OF STATE Sandra B. Mortnan

Secretary of State

DIVISION OF CORPORATIONS

1996

P94000039457 (4) DOCUMENT #
1. Corporation Name

ALVAREZ TAYLOR PLUMBING AND AIR CONDITIONING, IN

FILED May 01 1996 8:00 am Secretary of State



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Principal Place o	of Business	Maring Add						
1505 N FLORID TAMPA FL 336			1505 N FLORIDA AVE TAMPA FL 33602					
IAMPA TE 330	Ųž.	THAI H I C				3. Date Incorporated or Qualified 3a. Date of Last Report		
						05/25/1994	04/07/19	-
2. Principal Pla	ce of Business	2a. Maling /	Address			4. FEI Number		Applied For
1		26				59-3246413	60.	Not Applicable
Suite, Apt. #, etc.		Suite, A	Suite, Apt. #. etc.			5. Certificate of Status Desired		75 Additional ee Required
City & State			City & Stule			6. Election Campaign Financing \$5.00 May Be		
:3		28				Trust Fund Contribution		lded to Fees
Zip	Country	Z(p)		Cour	ritry	8. This corporation has liability for in Florida Statutes Yes	ntang:ble tax under No	rs 199.032.
4	9. Name and Address of Curre	[29] ent Registered Ag	ent	30		10. Name and Address of New R		
	5. Hallie and House of Oak		<u></u>		81 Name			
KASS, MI	ICHAEL			}	82 Street Add	lress (P.O. Box Number is Not Acceptal	lo)	
	LORIDA AVE			1				
TAMPA F	L 33602			ļ	83			
					84 City		E1 85	Zip Gode
SIGNATURE ,	Signature opening protection in of each term agr	ND DIRECTORS	<i>it</i> ,]	ns fan saat 13.	Agent's gestion of the	ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIREC	OTORS IN 12
TITLE	D		DELETE	1 1 1	II.f			ige 🔲 Addition
NAME	KASS, MICHAEL			12.62	NME .			
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ruo nereoy certify that the information supplied with rost inling is voluntarily littinshed and clear not quarty for the exemption stated in Section 119 07-300. Florida Statutes, I further certify that the information indicated on this arithad report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as finade under oath; that I am an officer or director of the comporation or the receiver of 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 attastiment with an address.

SIGNATURE: