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FILED  
Jan 22 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P94000043112 (9)

1. Corporation Name

VETERANS PLUMBING AND AIR CONDITIONING OF PALM B  
EACH INC.

Principal Place of Business

3020 N.W. 23RD AVE.  
OAKLAND PARK FL 33322  
US

Mailing Address

3020 NW 23RD AVE.  
OAKLAND PARK FL 33322  
US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/09/1994

4. FEI Number

65-0496834

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

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

RUBINCHIK, HARVEY L  
1776 N PINE ISLAND RD  
SUITE 118  
PLANTATION FL 33322

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 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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DT  
NAME GUILBERT, JOSEPH S  
STREET ADDRESS 511 NW 65TH AVE  
CITY-ST-ZIP MARGATE FL ☐ DELETE

TITLE D  
NAME KUEHN, ALBERT E  
STREET ADDRESS 328 N OCEAN BLVD #508  
CITY-ST-ZIP POMPAHO BEACH FL 33062 ☐ DELETE

TITLE D  
NAME GREEN, RUSSELL  
STREET ADDRESS 9860 NW 25TH CT.  
CITY-ST-ZIP SUNRISE FL ☒ DELETE

TITLE DS  
NAME MICALE, PETER  
STREET ADDRESS 5441 TYLER ST.  
CITY-ST-ZIP HOLLYWOOD FL ☐ DELETE

TITLE P  
NAME TILLMAN, CHRIS  
STREET ADDRESS 12706 89TH PLACE N  
CITY-ST-ZIP ROYAL PALM BEACH FL ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition  
12 NAME  
13 STREET ADDRESS  
14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition  
22 NAME  
23 STREET ADDRESS  
24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition  
32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition  
42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition  
62 NAME  
63 STREET ADDRESS  
64 CITY-ST-ZIP

14. 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 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: [Signature] J. S. GILBERT, JR. 05-11-1997-22m

CR2E034 (10/97)