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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

P94000056415 (0)

K&R	PLASTERING, INC.					
Principal Place		Mailing Address			 -	3011
5175 12TH AVE SW NAPLES FL 33999		5175 12TH AVE SW NAPLES FL 33999				
					3. Date Incorporated or Qualified 07/29/1994	3a. Date of Last Report 08/07/1995
2. Principal Place 21	ce of Business	2a. Mailing Address 26			4. FEI Number 65-0533851	Applied For Not Applicable
Suite, Apt. #, etc. 27		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	 }		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Ζφ 24	Country 25	Zip 29	Cour 30	try	8. This corporation has liability for Florida Statutes Yes	No.
	9. Name and Address of Curr	ent Registered Agent		81 Name	10. Name and Address of New R	egistered Agent
QUINN, JEFFREY C 307 AIRPORT RD N				32 Street Addr	ess (P.O. Box Number is Not Acceptab	le)
NAPLES FL 33942			В3			
			[B4 City		FL 85 Zip Gode
or registere	o the provisions of Sections 607,05) of agent, or both, in the State of Fic n, and accept the obligations of Se	rida. Such change was authorize	s, the abov d by the co	e-named corpor orporation's boar	ation submits this statement for the pur d of directors. Thereby accept the appi	pose of changing its registered office pintnient as registered agent. I am
	Synature, typed or portion name of registered age	the state of the s		kapinat saga at una romane.	ADDITIONS/CHANGES TO OFF	DATE
12.	VPS OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	Change Addition
NAME	WUERFEL, KARL		1.2 NA			
STREET ADDRESS	5175 12TH AVE SW			EET ADORESS		
CITY-ST-ZIP	NAPLES FL 33999		1.4 C/I	Y - \$1 - ZIF		
TITLE.	PT	[] DELETE	2 1 1:1	··		Change C Addition
NAME	WUERFEL, JOHN		2.2 NA	ME.		
STREET ADDRESS	5175 12TH AVE. SW		23.819	ELL ADDRESS		
C+TY - ST - 7IP	NAPLES FL 33999-P		2.4 C/T	Y - ST - ZiP		
TITLE		DELETE	3 1 TI	LF		- Change Addition
NAME			3.2 NA	ME		
STREET ADDRESS			33 SI	REEL ADDRESS		
CHTY - ST - ZIP				Y S1 ZIG		
TITLE		☐ DELETE	4 1 10	LF		Change Addition
NAME			4.2 NA			
STREET ADDRESS			4351	EET ACORESS		
CITY - ST - ZIP		FTLOGUELE		Y - ST - ZIP		
THILE		☐ DELETE	5 1 111			Change Addition
NAME			5.2 NAI			
STREET ADDRESS				REET ADORESS		
CHY-ST-ZIP		Finciet.		Y-ST-ZIP		Change Addition
TITLE		☐ DELETE	6 1 11			Change Addition
NAME			6 2 NA			
STRSET ADDRESS			1	SELADORESS		
City-St-ZiP			6.4.018	Y - \$1 - ZIF		

14. Ido 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)(k), 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 bases 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. appears in Block 12 or Block 13 if changed, or on an attachiment with an activese.

SIGNATURE: JOHN WUERFEL SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

15APR96 941-455-4448

CR2E034 (12/95)