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Jan 23 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P95000005152 (0)

1. Corporation Name  
CLEAR FLOW PLUMBING, INC.



Principal Place of Business  
2830 PALMARITA ROAD  
W. PALM BEACH FL 33406

Mailing Address  
2830 PALMARITA ROAD  
W. PALM BEACH FL 33406-5141

3. Date Incorporated or Qualified 01/20/1995  
3a. Date of Last Report 02/26/1996

2. Principal Place of Business		2a. Mailing Address		4. FEI Number 65-0561299		Applied For Not Applicable	
21 Suite, Apt #, etc		26 Suite, Apt #, etc		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
22 City & State		27 City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
23 Zip Country		28 Zip Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
24		29		30			

9. Name and Address of Current Registered Agent

KOHL, DONALD P P.A.  
2315 S. CONGRESS AVENUE  
W. PALM BEACH FL 33406

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 \_\_\_\_\_ DATE \_\_\_\_\_  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CATO, MARK	12 NAME	
STREET ADDRESS	1300 GLEN ROAD	13 STREET ADDRESS	
CITY - ST - ZIP	W. PALM BEACH FL 33406	14 CITY - ST - ZIP	
TITLE	VSD	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CATO, JON K	22 NAME	
STREET ADDRESS	2830 PALMARITA ROAD	23 STREET ADDRESS	
CITY - ST - ZIP	W. PALM BEACH FL 33406	24 CITY - ST - ZIP	
TITLE		31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY - ST - ZIP		34 CITY - ST - ZIP	
TITLE		41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY - ST - ZIP		44 CITY - ST - ZIP	
TITLE		51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY - ST - ZIP		54 CITY - ST - ZIP	
TITLE		61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY - ST - ZIP		64 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 appears in Block 12 or Block 13 if being added on in attachment with an address.

SIGNATURE DATE 1/14/97  
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 561-655-0029  
Daytime Phone #

CR2E034 (9/96)