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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

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DOCU 1. Corporation	MENT	# P95000009	9406		· · · · · · · · · · · · · · · · · · ·							
'		UMBING INC.	•									
Principal Place of Business Mailing Address 20 E. MORNINGVIEW DRIVE							_					
EUSTIS,												
A. Drianinal C	Di			-1 -5 - 11 · v		····		3. Date Incorporated or FEBRUARY 3,		3a. Date	of Last Re	port
2. Principal Place of Business			2a. 26	28. Mailing Address				4. FEI Number 59–3298683			— <del> </del>	pplied For ot Applicable
Suite Apt	Suite Apt #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Di	esired		•	Additional equired
Crty & Stat	te		28	City & State				6. Election Campaign Fir Trust Fund Contributio	•			May Be to Fees
ZIp 24		Country 25	29	Zıp	30	Country		This corporation has to     Florida Statutes	ability for i	intangible ta		
	9. Name	and Address of Cur	rrent Registe	ered Agent				10. Name and Address of		gistered A	gent	
THEODOR	E E. CH	SHING, SR.				61 Na	me					
		IEW DRIVE				<b>82</b> Str	eet Addre	ess (P.O. Box Number is Not	Acceptat	ile)		
EUSTIS,						83						
								<u></u>			r	
11. Pursuant office or r	to the provision	ons of Sections 607.0	0502 and 607 late of Florida	7.1508, Florida Statu a. Such change was	utes, the	84 City above-nanged by the	ed corn	oration submits this statemen	nt for the p	FL surpose of o	hanging i	Code ts registered
agent I a	registereo age am familiar wit	ent, or both, in the Sta h, and accept the ob or printed riame of registered	late of Florida oligations of,	a. Such change was Section 607.0505, F	authori Iorida S	above-nan zed by the datutes	ned corpi corporati	on's board of directors. I here  be when relatings	eby accer	ourpose of on the appointment of	hanging i ntment as	ts registered registered
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made under 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 cath; 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 Blook 12 or Blook 13 if changed, or on an attachment with an address

SIGNATURE: JEO dose PRINTED NAME OF BIONING OFFICE OR DIRECTOR THEODORE E. CUSHING, SR.