## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

STREET ADDRESS

SIGNATURE:

CHY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

Jan 28 1997 8:00am

Secretary of State

(96/6)

CR2E034

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9500053029 (1)

BUDGET PLUMBING & UTILITY SERVICES, INC.

P.O. BOX 62285 8081 NORMANDY BLVD., #6 JACKSONVILLE FL 32219-2285 JACKSONVILLE FL 32221 3. Date Incorporated or Qualified 34. Date of Last Report 07/10/1995 04/04/1996 2. Principal Place of Business FEI Number 2a. Mailing Address Applied For 59:3320872 26 Not Applicable 21 Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country 8. This corporation has liability for intangible tax under s. 199.032, X Yes 24 29 30 Florida Statutes 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name JOHNSON, DAVID E 8081 NORMANDY BLVD., #6 82 Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32221 83 84 City 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 fam har with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstating) Signature, typical or printed harrie of registered agent and title if applicable DATE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition 1.1 TITLE TITLE JOHNSON, DAVID E John E. Morgan 8081-6 Normondy Blvd., 46 NAME 1.2 NAME 8081 NORMANDY BLVD., #6 1.3 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32221 Jacksonville, 71a. 32221 1.4 CITY-ST-ZIP CITY-ST-ZIP \_\_\_ Change Addition Addition ☐ DELETE TITLE 2.1 TITLE Joseph J. Sbandy Bird. , " 6 2.2 NAME MAME STREET ADDRESS 2.3 STREET ADDRESS Jacksonville, 71a, 32221 2. 4 CITY-ST-ZIP CHTY - ST - ZIF DELETE Change Addition TIFLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS City-St-ZiP 3.4 CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAMÉ 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY - ST. ZIP DELETE Change Addition 5.1 TITLE THE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-Z₽ ☐ Addition DELETE 6 I TITLE THEF 62 NAME NAME

63 STREET ADDRESS

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