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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000076410 (6)

TRU-FLO PLUMBING, INC. Principal Place of Business Mailing Address

FILED May 06 1998 8:00am Secretary of State



3000 NO. TROPICAL TRAIL MERRITT ISLAND FL 32953		3000 NO. TROPICAL TRAIL MERRITT ISLAND FL 32953			-	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
						09/29/1995			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	<u> </u>	Applied For	
21		26				59-3340665		Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					\$8.7	5 Additional	
22		27				5. Certificate of Status Desired	Fee	Required	
City & State	6	City & State				6. Election Campaign Financing	\$5.0	O May Be	
23		28				Trust Fund Contribution		d to Fees	
Zip	Country	Ζιρ	Countr	ry		8. This corporation owes or has paid the o	urrent year	Intangible	
24	25	29 30			Personal Property Tax due June 30. Yes No				
	9. Name and Address of Curre	nt Registered Agent			1	Name and Address of New Registere	Agent		
M	NROTT A, MICHAEL J		8.	1 1	Name				
3000 NO. TROPICAL TRAIL			82	2 3	Street Address (P.O. Box Number is Not Acceptable)				
ME	ERRITT ISLAND FL 32953		8:	-					
			100						
			84	4 (City	F	85 Z	ip Code	
agent. I a	to the provisions of Sections 607,056 egistered agent, or both, in the State m familiar with, and accept the oblig	02 and 607.1508, Florida Sta e of Florida. Such change w gations of, Section 607.0505,	atutes, the abor as authorized t , Florida Statute	ve-n by (h	named corpora he corporation'	ation submits this statement for the purpose 's board of directors. I hereby accept the a	_	g ils registered as registered	
SIGNATURE	Signature, typed at ponted name of registered ag	n of earl title if around the C	NOTE: Registered A	pent s	signature required w	when reinslaund) DATE			
12.		ND DIRECTORS	13.	genra	orgination required in	ADDITIONS/CHANGES TO OFFICERS A	ID DIRECT	ORS IN 12	
TITLE	P	DELETE	1.1 TITLE				☐ Chang		
NAME	MAROTTA, MICHAEL J. JR.		1.2 NAME						
STREET ADDRESS	3011 SEAGATE CIRCLE		1.3 STREE	E1 ADI	DDRESS				
CITY-ST-ZIP	MERRITT ISLAND FL		1.4 CITY	ST- 7	7IP				
TITLE	81	☐ DELETE	2.1 TITLE				☐ Chang	e Addition	
NAME	MAROTTA, MICHAEL J.		2.2 NAME					İ	
STREET ADDRESS	3000 N. TROPICAL TRAIL		2.3 STRES	ET ADI	DDRESS				
CITY-ST-ZIP	MERRITT ISLAND FL		2. 4 CITY						
TITLE		DELETE	3.1 TITLE				☐ Chang	e Addition	
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREE		ODRESS			Į	
CITY-ST-ZIP			3.4. CITY						
TITLE		DELETE	4.1 TITLE				☐ Chang	e Addition	
NAME			4. 2 NAM						
STREET ADDRESS			4.3 STREE	ET ADI	DORESS				
CITY+ST-ZIP			4.4 CITY						
TITLE		DELETE	5.1 THILE				Chang	e Addition	
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREE		ODRESS				
CITY-ST-ZIP			5.4 CITY-						
TITLE		DELETE	6.1 TITLE		£11		☐ Chang	e Addition	
NAME			6.2 NAME					_	
STREET ADDRESS			6.3 STREE		ODRESS				
OTHER AUUNESS				יטאוז					

14. Thereby 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 altachment with an address.