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 # P95000077670 (4)

CERTIFIED MECHANICAL SERVICES INC.

FILED Apr 28 1998 8:00am Secretary of State



City & State City & State 28 State Trust Fund Contribution Country Country Country Country Country Country 6. Election Campaign Financing Financing Added to Fees Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible	Principal Place of Business		Mailing Address			i concean con ancer Brite Boill abeit antie anie (60te 1801) Beite 1801 Antie (601)		
24. Mailing Acaresis 3. Date Incorporation or Qualified 10/10/1995 22. Principal Pack of Business 32. Mailing Acaresis 33. Mailing Acaresis 34. Mailing Acaresis 35. Mailing Acar								
2. Principal Place of Bus noss 2. A Mailing Address 2. Principal Place of Bus noss 2. Substance 26	BRANDON FL	. 33510	BRANDON FL 33510			DO NOT WRITE IN THE	S SPACE	
Principal Place of Business 2A Minling Address 26 P. O. Pox V. O.u. Service of Business 26 P. O. Pox V. O.u. Service of Business Pox							J DI ACL	
2. Mining Appries 2. M	1							
SURIO, Apr. #, etc. Sulfo, Apr. #, etc.	2. Principal P	lace of Business	2a. Mailing Address		·····		 	Applied For
Solicy April 4, etc. Solicy State Solicy				100	L_{c}	.,	} -	
Coty & State Coty & State Coty & State Country Replaced Address of Current Registered Agent Country Replaced Agent								
City & State 2	22		<u> </u>			5. Certificate of Status Desired		
Zign		θ				& Flaction Compaign Financing		
Zip Country 28 8 3559 3 8559 4 90	23			71		· · · ·		
25		Country		Cour	ntry	— <u> </u>		
SIRISKA, JOANNE SEALS N° SIGNATURES 6822 22ND AVE N SUITE 277 ST. PETERSBURG FL 33710 80 81 82 Siricet Address (P.O. Box Number is Not Acceptable) 82 Siricet Address (P.O. Box Number is Not Acceptable) 83 Siricet Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 85 Zip Code 86 Zip Code 87 88 Zip Code 89 Zip Code 80 Zip Code	24	25				· · · · · · · · · · · · · · · · · · ·		
SIRISKA, JOANNE				1001	<u> </u>			
SEALS N° SIGNATURES 8822 22ND AVE N SUITE 277 ST. PETERSBURG FL 33710 11. Pursuant to the provisions of Sections 607 0002 and 607 1009. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent. Tember with, and necept the obligations of , Section 607 0505. Florida Statutes, the above named corporation's board of directors. Thereby accept the appointment as registered agent. Tember with, and necept the obligations of , Section 607 0505. Florida Statutes. The above named corporation's board of directors. The easy accept the appointment as registered agent. Tember with, and necept the obligations of , Section 607 0505. Florida Statutes. SIGNATURE	SID	HOLA IOANNE			81 Name			
8822 22ND AVE N SUITE 277 ST. PETERSBURG FL 33710 84 City FL 85 Zip Codo FL 95 Line provisions of Sections 607.0502 and 667.5508, Florida Statutes, the above named concretion submits this statement for the purpose of changing its registered agent. I am Itemitiar with, and accept the obligations of Section 607.6505, Florida Statutes. SIGNATURE 72. OFFICE/RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. III.L. P								
ST. PETERSBURG FL 33710	1	-,			82 Street Ad	ddress (P.O. Box Number is Not Acceptable)		
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. North Angle or registered agent, or both in the State of Florida. Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both in the State of Florida. Statutes, the above named corporation's ubmits this statement for the purpose of changing its registered agent, or both in the State of Florida. Statutes, the above named corporation's board of directors. I hereby accept the appointment as registered agent, or both in the State of Florida. Statutes. SIGNATURE 12.		_		ł	83			
TIL PURSUANT to the provisions of Sections 607,05.02 and 607 1508; Florida Statutes, the above named corporation submits this statement for the purpose of changing its 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, or both in the Immitted with, and accept the obligations of Sociolo 607 0505, Florida Statutes board of directors. I hereby accept the appointment as 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, 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, or both in the State of Plorida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both in the State of Plorida Such change agent. I ment and accept the appointment as registered agent, or both in the state of the Appointment as registered agent, or both in the State of Plorida Such change agent. I ment and accept the appointment as registered agent, or both in the state of the appointment as registered agent. I hereby accept the appointment as registered agent. I hereby accept the appointment as registered agent, or both in the appointment as registered agent. I hereby accept the appointment as registered agent. I hereby	Ş1.	FEIENSDUNG FL 33/10		ŀ				
11. Pursuant to the provisions of Sections 607 (0.002 and 607 1508 floorida Statutes, the above named corporation's submitts this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. 12.				Ţ	84 City		85 Zij	p Code
SIGNATURE STREET ADDRESS CITY-ST-ZPP TITLE NAME STREET ADDRESS CITY-ST-ZPP STREET ADDRESS CITY-ST-ZPP STREET ADDRESS CITY-ST-ZPP TITLE NAME STREET ADDRESS CITY-ST-ZPP STREET ADDRESS CIT	dd Durauant	to the are delena at Costinue 201 01	22 4 4 607 1600 11-11-61-1	Ann the ele				
Signature Sign	office or r	registered agent, or both, in the State	e of Florida. Such change was	nes, the ac authorized	ove-named co by the corpo	orporation submits this statement for the purpose pration's board of directors. I hereby accept the ar	ot changing spointment a	is registered as registered
Signature Nyend or protect name of nigotises of anyels and its disaglar author disposition of anyels and all select disposition of anyels and all select disposition of anyels and all select disposition of anyels and all selections and DIRECTORS IN 12 TITLE	agent. I a	m familiar with, and accept the oblig	ations of, Section 607.0505, F	Iorida Stati	utes.		•	Ū
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	SIGNATURE							
TITLE	40				Agent signature re		15 DIDEOT	200 11 10
NAME STREET ADDRESS 210 CRANBERRY LANE 13 STREET ADDRESS 210 CRANBERRY LANE 13 STREET ADDRESS 210 CRANBERRY LANE 13 STREET ADDRESS 22 RAME		OFFICERS AN			, r	ADDITIONS/CHANGES TO OFFICERS AT		
STREET ADDRESS 210 CRANBERRY LANE 13 STREET ADDRESS 14 CITY-S1-ZIP		P POLICE	[] OFFER	į.			L Change	, Magitian
CITY_ST-ZIP								
TITLE				1.3 STI	REET ADDRESS			
MELTON, LISA K 22 NAME 23 STREET ADDRESS 210 CRANBERRY LANE 23 STREET ADDRESS 24 CITY-S1-ZIP			·					
\$10 CRANBERRY LANE \$2.4 CITY-S1-ZIP \$1.1 TILE \$1.1 TILE \$1.2 TILE \$1.2 TILE \$1.3 TILE	TITLE	7.	☐ DELETE	2.1 TIT	LE		∐ Change	Addition
CITY-ST-ZIP	NAME			2.2 NA	ME			
TITLE DELETE 3.1 TITLE Change Addition NAME 3.2 NAME 3.3 STREET ADDRESS	STREET ADDRESS			2.3 STF	REET ADDRESS			
NAME	CITY-ST-ZIP	BRANDON FL 33510		2. 4 CI	TY-ST-ZIP			
STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	TITLE		DELETE	3.1 7(1	LE		☐ Change	Addition
STREET ADDRESS S S S S S S S S S	NAME			. 3.2 NA	ME			
TITLE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition NAME DELETE 5.1 TITLE Change Addition NAME 5.3 STREET ADDRESS CITY-ST-ZIP Change Addition TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME CS NAME CS NAME CS STREET ADDRESS STREET ADDRESS 6.3 STREET ADDRESS CS STREET ADDRESS	STREET ADDRESS			3.3 \$19	REE1 ADDRESS			
NAME	CITY-ST-ZIP			3.4. CI	TY-S1-ZIP			
A3 STREET ADDRESS	TITLE		DELETE	4.1 TiT	LE		Change	Addition
A CITY-ST-ZIP	NAME			4. 2 NA	IME			
TITLE DELETE 5.1 TITLE Change Addition NAME 52 NAME	STREET ADDRESS			4.3 STF	REET ADDRESS			
TITLE DELETE 5.1 TITLE Change Addition NAME 52 NAME	CITY-ST-ZIP			4.4 CIT	Y-ST-21P			
NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CHY-ST-ZIP 5.4 CHY-ST-ZIP TITLE DELETE 6.1 HITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS			DELETE				Change	Addition
STREET ADDRESS 5.3 STREET ADDRESS CHY-ST-ZIP 5.4 CHY-ST-ZIP TITLE DELETE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS			_				_ •	
CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME 6.3 STREET ADDRESS 6.3 STREET ADDRESS					1			
TITLE NAME 6.1 TITLE 6.2 NAME 6.2 NAME 6.3 STREET ADDRESS 6.3 STREET ADDRESS								
NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS			DELETE				Change	Addition
STREET ADDRESS 6.3 STREET ADDRESS	·						in change	- Addition
CITY-ST-ZIP 64 CITY-ST-ZIP								
14 hereby certify that the information sympticd with this filing does not qualify for the exemption stated in Section 119.07(3Vi). Florida Statutes, I further certify that the information		soulf, that the information and Code	dita this filler along and er			in Control 440 OT(0)(i) Freddy Carl do y 15 dies		7242

indicated on this annual report or suppliemental 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or on attachment with an address.