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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P95000097277

1. Corporation Name

GUI FCOAST PLUMBING CORPORATION

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Principal Place	a of Business	Mailing A	ddress			e emberane ten enten dette anter anter anter anter	Eco n (B eit i alben ei n er ((\$4() (\$4() (48)
4023 SAWYER RD		4023 SAW	4023 SAWYER RD					
201		201	201			DO NOT WRITE IN THIS SPACE		
SARASOTA FL 34232			SARASOTA FL 34232 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed		
US		U8				12/20/1995		
2. Principal Pl	lace of Business	2a. Mailin	g Address			4. FEI Number		plied For
21		26				65-0629070	1	t Applicable
Suite, Apt. #, etc.		Suite,	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A	Additional quired
22	<u> </u>	27	04-4-					·
City & State	8		State	-		6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added to	
23	Country	28 Zip		Country		This corporation owes the current year		01665
Žip	25	29	F-	30		Personal Property Tax.		□No
24	9. Name and Address of C			30		10. Name and Address of New Register	ed Agent	
				81	Name			
HAR	MON, MICHAEL			-	Ctro - A A = 4	fress (P.O. Box Number is Not Acceptable)		
4023 SAWYER RD				82	Street Add	aress (F.O. box Number is Not Acceptable)		_
201				83			_	
SAR	ASOTA FL 34232						0-1 7:- 0	N-d-
				84	City	F	85 Zip C	-ode
		1007.150		a the char	J	d'	of changing its	registered
11. Pursuant	to the provisions of Sections 60	7.0502 and 607.150	8, Florida Statute	es, ale above	e-named corp			
11. Pursuant office or n	to the provisions of Sections 60 egistered agent, or both, in the 5	7.0502 and 607.150 State of Florida. Suc	8, Florida Statute th change was du on 607 0505 Flori	ithorized by	e-named corporati	tion's board of directors. I hereby accept the ap	pointment as reg	gistered
office or n agent. I a	to the provisions of Sections 60 egistered agent, or both, in the sm familiar with, and accept the	7.0502 and 607.150. State of Florida. Suc	8, Florida Statute th change was du no 607.0505; Flori	uthorized by ida Statutes	e-named corporati	poration submits this statement for the purpose tion's board of directors. I hereby accept the ap	pointment as reg - 99	gistered
11. Pursuant office or nagent. I a	to the provisions of Sections 60 egistered agent, or both, in the 5 m familiar with, and accept the comparation of register signature, typed or printed name of register	State of Florida. Suc	on 607.0505, Flori	ida Statutes	the corporati	ion's board of directors. I hereby accept the ap	- 99	gistered
office or n agent. I a	egistered agent, or both, in the s m familiar with, and accept the Signature, typed or printed name of register	State of Florida. Suc	607.0505 Flori	ida Statutes	the corporati	cion's board or directors. Thereby accept the ap	-99	PRS IN 12
office or n agent. I a SIGNATURE	egistered agent, or both, in the s m familiar with, and accept the Signature, typed or printed name of register	State of Florida. Suc obligations of, Section and agent and title if application	607.0505 Flori	ida Statutes	the corporati	red when reinstating) DATE	-99	
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CITY-ST-ZIP

14. I 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP