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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 07 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000024279 (7)

SUN TECH PLUMBING, INC.

appears in Block 12 or Block 13

SIGNATURE:

Principal Place of Business Mailing Address 92 2ND ST. 92 2ND ST. FT. MYERS FL 33907 FT. MYERS FL 33907-2407 3. Date Incorporated or Qualified 3a. Date of Last Report 03/19/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For irraia Stred 2738 Craig Street みフ3४ 45-0656518 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State 6. Election Campaign Financing \$5.00 May Be \Box **Trust Fund Contribution** Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name JENKINS, RUSTIN J 92 2ND ST. Street Address (P.O. Box Number is Not Acceptable) 82 FT. MYERS FL 33907 83 84 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 familiar with, and accept the obligations of Section 607.0505. Florida Statutes. Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)President Jenkins, Ructin J. DELETE Change THE 1.1 TITLE ___ Addition jenkins, Rustin j NAME 1.2 NAME 2734 craig St. #2 92 2ND ST. STREET ADDRESS 1.3 STREET ADDRESS FT. MYERS FL 33907 CITY-ST-ZP 1.4 City - ST- ZiP HILE Vice President ☐ DELETE Change 2.1 TITLE Addition StumpF, Robert NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS C/1Y-S1-26 2.4 CITY-ST-ZIP DELETE THE Change 3.1 TITLE Addition NAME 3.2 NAME STREET ADORESS 3.3 STREET ADDRESS CUY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition MALIE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 44 CITY-ST-ZIP DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREE! ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TI*LE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** C(TY - S1 - 2)P 6.4 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 efficiency of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

or on an attachment with an address