PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P96000042934**1. Corporation Name

PRECISE PLUMBING, INC.

FILED Apr 29, 1999 8:00 am Secretary of State 04-29-1999 90071 008 ***150.00

Principal Place of Business Mailing Address						I I I I I I I I I I I I I I I I I I I	1818 17878	10108 111	*** ****		
17883 38TH PLACE NORTH LOXAHATCHEE FL 33470		17883 38TH PLACE NORTH LOXAHATCHEE FL 33470				DO NOT WRITE IN THIS	SPACE	į			
						3. Date Incorporated or Qualifed 05/13/1996					
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number		Appi	ed For]	
21		26				65-0674893	Not Applicable				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			· · · · · · · · · · · · · · · · · · ·	5. Certifcate of Status Desired	\$8.75 Additional Fee Required				
City & State	e	City & State				6. Electior Campaign Financing Trust Fund Contribution \$5.00 Added to			•		
Zip	Country	Zip	Zip Cour			8. This corporation owes the current year Intangible					
24	25	29	30			Personal Property Tax.	Yes]No	-	
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered	Agent			┨	
OTABOUTD PROVEY A				81	Name						
1788	RCHER, RICKEY A. 13 38TH PLACE NORTH			82	Street Addre	ess (P.O. Box Number is Not Acceptable)	,				
rox	AHATCHEE FL 33470			83							
				84	City	FL	85	Zıp Co	de	1	
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida. Such change was all	ithorizec	ı by t	ine corporatio	pration submits this statement for the purpose of n's board of di ectors. I hereby accept the appcin	changin ntment a	g its re as regin	gistered tered		
	in fallinar that, and docopt the obligan										
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE	Registered	Agent	signature required					. l	
12.	OFFICERS AND	DIRECTORS	13.			ADDITIO IS/CHANGES TO OFFICERS AN					
TITLE	D	☐ DELETE	1.1 TITLE				Cha	nge	☐ Addition	3	
NAME	STARCHER, RICHEY A. 1.2 N		ME						3		
STREET ADDRES ;	17883 38TH PLACE NORTH		1.3 STREET ADDRESS		ADDRESS					ļ	
CITY-ST-ZIP	LOXAHATCHEE FL 33470		1.4 CI	TY-ST	-ZIP				FTT 4 LEE	Ì	
TITLE		☐ DELETE	2.1 Tr	TLE			Cha	nge	Addition	`	
NAME			2.2 N/	AME							
STREET ADDRESS			2.3 STREE		ADDRESS					1	
CITY-ST-ZIP		<u>_</u>	2.4 CITY-		T-ZIP				F]	
TITLE		☐ DELETE	3.1 TITLE				Cha	nge	Addition		
NAME			3.2 NAME								
STREET ADDRESS			3.3 ST	TREET	ADDRESS						
CITY-ST-ZIP			3.4 CITY-ST-ZIP		r- ZIP					-	
TITLE		☐ DELETE	4 1 TI	TLE			Cha	inge	Addition		
NAME			4. 2 N	AME						ì	
STREET ADDRESS			4.3 ST	REET.	ADDRESS						
CITY-ST-ZIP			4.4 CITY-		-ZIP				- Addition	-	
TITLE		☐ DELETE	5.1 TO				☐ Cha	шде	Addition	}	
NAME			5.2 NAME		100050-						
STREET ADDRESS			5.3 STREE								
CITY-ST-ZIP			_	TY-ST	-ZIP				- Addition	1	
TITLE		☐ DELETE	6.1 TI				☐ Cha	inge	Addition		
NAME			6.2 N								
STREET ADDRESS					ADDRESS					1	
CITY-ST-ZIP			6.4 CI	TY-ST	-ZIP						

14. I hereby sertify 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 are an officer or director of the corporation or the receive or trustee empowered to execute this report as required by Chapter 307, Florida Statutes; and that n y name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

OFFICER UR DIRECTORY A STANCHUR