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 # P9600053355 (9)

AQUA PLUMBING & AIR SERVICES, INC.

FILED Mar 30 1998 8:00am Secretary of State



District Plans (District Address Addre								
Principal Place of Business Mailing Address								
1760 EAST AVENUE NORTH 1760 EAST AVENUE NORTH						l		
SARASOTA FL 34234				SAHASUTA	SARASOTA FL 34234			DO NOT WRITE IN THIS SPACE
Ì								3. Date Incorporated or Qualified
								06/21/1996
2. Principal Place of Business 2a, Mailing Addre					Address			4. FEI Number Applied For
21	21			26	26			65-0673987 Not Applicable
	Suite, Apt. #, etc.			Suite, Ar	Suite, Apt. #, etc.			S8 75 Additional
22	22			27	27			5. Certificate of Status Desired Fee Required
	City & State			City & St	City & State			6. Election Campaign Financing \$5.00 May Be
23				28				Trust Fund Contribution
	Zip		Country	Zip	ļ	Country	/	8. This corporation owes or has paid the current year Intangible
24			25	29	30	<u> </u>		Personal Property Tax due June 30. Yes No
		9, Name	and Address of Curr	ent Registered Age	ent		1 :	10. Name and Address of New Registered Agent
	BR	iown, rich	iard			81	Name	
	170	60 EAST AV	/enue North			82	Street	Address (P.O. Box Number is Not Acceptable)
	SARASOTA FL 34234						<u> </u>	
						83		i
						64	City	85 Zip Code
						"	City	FL P 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.								
SIGNATURE								
5	2110 I QITE	Signature, typed	or printed name of registered a	agent and title if applicable.	(NOTE: R	egistered Ag	ent signature	required when reinstating) DATE
12			OFFICERS A	ND DIRECTORS	_	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITE	E	D	.=	Ĺ	DELETE	1.1 TITLE		P & Change Addition
NAN	AE .		JOHN E			1.2 NAME		MILLER, JOHN E.
STR	EET ADDRESS		ST AVENUE NORTI	Н		1.3 STREE	ADDRESS	1760 EAST AVENUE N
CITY	-ST-ZIP	SARASC)TA FL 34234			1.4 CITY-	ST-ZIP	SARASOTA FL 34234
TITL	E			Ĺ] DELETE	2.1 TITLE		V Change 🖫 Addition
NAM	ŧE.					2.2 NAME		BROWN, RICHARD
STR	EET ADDRESS					2.3 STREE	ADDRESS	1760 EAST AVENUE NORTH
CITY	- ST- ZIP	L				2.4 CITY-	ST-ZIP	SARASOTA FL 34234
TITL	E] DELETÉ	3.1 TITLE		☐ Change ☐ Addition
NAM	IE					3.2 NAME		
STR	eet address)				3.3 STREE	ADDRESS	1
CITY	-ST-ZIP					3.4. CITY-	ST-ZIP	
TITL	£				DELETE	4.1 TITLE		☐ Change ☐ Addition
NAM	IE					4. 2 NAME	İ	
STR	EET ADDRESS				i	4.3 STREET	ADDRESS	
cm	-ST-ZiP	}				4.4 CITY-5	ST-ZIP	
TITL				L	DELETE	5.1 TITLE		☐ Change ☐ Addition
NAM	IE					5.2 NAME		
STR	ET ADDRESS					5.3 STREET	ADDRESS	
	-ST-ZIP					5.4 CITY-S	i	
TITL					DELETE	6.1 THILE	-	☐ Change ☐ Addition
NAM				_		6.2 NAME		
	ET ADDRESS					6.3 STREET	ADDRESS	
						6.4 CITY-5	i	
UIII	-ST-ZIP		-, ,, ,, , . , , , , , , ,			0.4 UH11~3	11 - ZIF	11. O. E. 440 07(0)/9 (1.24. O.) 14. 15. II. II. III.

4. 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 supprimental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee emporered 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 or an attachment with an address.

CICNATURE.

whend Drawn

3/24/98 (941)366-7677