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 # P96000055969 (5)

FILED Mar 10 1998 8:00am Secretary of State

1. Corporatio	NNEE PLUMBING, INC.	, ,	·		120 021 110 110 110 110 110 100 100 100
Principal Plac	e of Business	Mailing Address		L KARIJARI 110 (BITA BITAT BATTI BATTI BATTI BATTI BATTI	DICO: Divid Layta Attil 1854 (68)
7557 216TH STREET 7557 216TH STREET OBRIEN FL 32071 OBRIEN FL 32071				DO NOT WRITE IN THI	e edace
				3. Date Incorporated or Qualified	SSPACE
				06/28/1996	
2. Principal P	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3388294	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the o	current year Intangible
24	25 g. Name and Address of Cur		30	Personal Property Tax due June 30. 10. Name and Address of New Registers	
ΔΡ	PEUL, ALFRED M		81 Name	10.	
7557 216TH STREET					
OBRIEN FL 32071			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
			83		
			24 80		
			84 City	F	2ip Code
11, Pursuant office or r agent. I a	to the provisions of Sections 607.0 egistered agent, or bolh, in the St m familiar with, and accept the ob	0502 and 607.1508, Florida Statute ate of Florida. Such change was a oligations of, Section 607.0505, Flo	es, the above-named corp uthorized by the corporat rida Statutes.	oration submits this statement for the purpose ion's board of directors. I hereby accept the a	of changing its registered ppointment as registered
SIGNATURE					7/7/
	Signature, typed or printed name of registered		: Registered Agent signature require		
12. TITLE	PD	AND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	APPELL, ALFRED M		1.2 NAME		Change Racinon
STREET ADDRESS	7557 216TH ST		1.3 STREET ADDRESS		[3
CITY-ST-ZIP	OBRIEN FL		1.4 CITY-ST-ZIP		
TITLE	VP	DELETE	2.1 TITLE		Change Addition
NAME	APPELL, CANDICE L		2.2 NAME		
STREET ADDRESS	7557 216TJ ST		2.3 STREET ADDRESS		
CITY-ST-ZIP	OBRIEN FL		2. 4 CITY-ST-ZIP		
TITLE	,	☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		}
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		——————————————————————————————————————	5.4 CITY-ST-ZIP		0
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	TOTAL OF THE STATE		6.4 City-St-ZIP		

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 supplemental annual report is true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to specule this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed of physical physic

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