## 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 # P96000067600 (2)

BOB'S OK PLUMBING; INC.

## FILED Apr 14 1998 8:00am Secretary of State

Principal Place	e of Business	Mailing Address		I 100110001 110 FD110 01131 00417 00171 00111 00110	01111 10.64% 01411 00111 8711 1001
9717 ARROW DRIVE 9717 ARROW DRIVE					
NEW PORT RICHEY FL 34654 NEW PORT RICHEY FL		34654			
<b>!</b>				DO NOT WRITE IN TH	IS SPACE
ļ				3. Date Incorporated or Qualified	
2. Principal Pi	lace of Business	2a. Mailing Address		08/14/1996 4. FEI Number	Applied For
21		26		59-3402026	Applied For Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				\$8.75 Additional	
27		27		<b>5.</b> Certificate of Status Desired	Fee Required
		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
L Zip	Country	Zip	Country	8. This corporation owes or has paid the	current year Intangible
24	25	29	30	Personal Property Tax due June 30.	Yes X No
	9. Name and Address of Curr	ant Hegistered Agent	81 Name	10. Name and Address of New Register	ed Agent
	GHES, RICHARD		81 Name		
14531 AUBREY AVE.			82 Street A	Address (P.O. Box Number is Not Acceptable)	
SPI	RINGHILL FL 34810		83		
			63		
			84 City		B5 Zip Code
11 Pureuent t	to the provisions of Sections 607 Of	02 and 607 1509 Florida State	utos the above named	F	' <b>L</b>
office or re	egistered agent, or both, in the Sta	le of Florida. Such change was	authorized by the corp	corporation submits this statement for the purpose oration's board of directors. I hereby accept the a	appointment as registered
	m familiar with, and accept the oth	gations of, Section 607.0505, F	-lorida Statutes.		
SIGNATURE .	Signature, typed or printed name of registered a	cont and tille if anchestile (NC	DTE: Registered Agent signature	required when reinstating) DATE	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	HUGHES, RICHARD		1.2 NAME		
STREET ADDRESS	14531 AUBREY AVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	SPRING HILL FL		1.4 CITY - ST - ZIP		
TITLE		DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			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		Deire	3.4. CITY-ST-ZIP		
TITLE		LIII DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY-ST-ZIP		Channe
NAME		□ ptreit	5.1 TITLE		☐ Change ☐ Addition
STREET ADDRESS			5.2 NAME		
CITY-ST-ZIP			5.3 STREET ADDRESS		
TITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
NAME	*		6.2 NAME		ELI GHAHYE LLI AGGIGION
STREET ADDRESS					
CITY-ST-ZIP			6.3 STREET ADDRESS		
	ertify that the information supplied	with this films does not qualify (	64 CITY-ST-ZIP	Lin Continu 110 07/3Vi) Florida Chabit - 14 -th	

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 supplementar a mual roport is true and accurate and that hy signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receipter or trusteer empowered to execute this eport as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if chapter do not appear of the corporation or the receipter of trusteer empowered to execute this eport as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if chapter do not not appear of the receipter of the corporation of the

SIGNATURE.

Wyga (

(CR) 847-7860