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 # P97000027799 (0)

KRAFTKOR PLUMBING, INC.

FILED Apr 15 1998 8:00am Secretary of State



								4 11 12 15 16 16 6 16 17 18 1 16
Principal Place of Business Mailing Address)	I BBIIB IODII IBBII LABII	J 16163 (86) (83)
316 PONTE V LAKE WORTH		316 PONTE VEDRA ROAD LAKE WORTH FL 33461			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified		
		<u> </u>				03/24/1997		
2. Principal Place of Business		2a. Mailing Address			4. FEI Number Applied For Wot Applied For Not Applied For			
21] Suite, Apt. #, etc.		Suite, Apt. #, etc.				45-6743054		Not Applicable
		27				5. Certificate of Status Desired	1 7	5 Additional Required
City & State		City & State				e Floation Compaign Financing		
23		28			-	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip Country		Zip Country				8. This corporation owes or has paid the current year Intengible		
24	25	29	30		ı	Personal Property Tax due June 30. 👿 Yes 🔲 No		
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Reg	Istered Agent	
KRAFTCHAK, DAVID E				81 Nam	1 Name			
	B PONTE VEDRA ROAD	}		82 Stree	at Addres	ss (P.O. Box Number is Not Acceptable	e)	
LA	KE WORTH FL 33461		i			· · · · · · · · · · · · · · · · · · ·	<u> </u>	
				83				ļ
				84 City			85 Z	Zip Code
				ii				
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State c im familiar with, and accept the obligat	of Florida. Such change was a	authorized	by the co	d corpor proration	ration submits this statement for the punis board of directors. I hereby accept	urpose of changin the appointment	g its registered as registered
SIGNATURE								}
	Signature, typed or ported name of registered agent			d Agent signati	релирел эк	when reinstating)	DATE	
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECT	
TITLE	D DAETOUAN DAVID C		1.1 11		ł		Cuant	ge L Addition
NAME KRAFTCHAK, DAVID E STREET ADDRESS 316 PONTE VEDRA ROAD			1.2 NAME];
STREET ADORESS	LAKE WORTH FL 33461		1.3 STREET ADDRESS		' [
CITY-ST-ZIP TITLE	D	DELETE	1.4 CI 2.1 TI	TY-ST-ZIP			Chang	ge Addition
NAME	KORZENIOWSKI, JAMES J	- · · · · · · · · · · · · · · · · · · ·					L. Chang	Je L HOURIUM
STREET ADDRESS	1851 WISTERIA ST		2.2 NA	reet address	.			}
CITY-ST-ZIP	WELLINGTON FL				' }			ł
TITLE	D			TY-ST-ZIP			Chanc	ge Addition
NAME	KRAFTCHAK, CAROLYN 32N					و العادل	,	
STREET ADDRESS	316 PONTE VEORA ROAD			reet address	.			1
CITY-ST-ZIP	LAKE WORTH FL 33461			TY-ST-ZIP				1
TITLE	D	☐ DELETE	4,1 T(1		+		Chang	ge Addition
NAME	Korzeniowski, Lori	— 1	4.2 N					
STREET ADDRESS	1851 WISTERIA ST		- 6	REE1 ADDRESS	: 1			İ
CITY-ST-ZIP	WELLINGTON FL		- E	TY-ST-ZIP	}			1
TITLE	Transfer of the	DELETE	5.1 Til		 		Chang	ge Addition
NAME			5.2 NA					
STREET ADDRESS			•	reet address	,			1
CITY-ST-ZIP				IY-ST-ZIP				İ
TITLE		DELETE	6.1 Til		1		☐ Chang	ge Addition
NAME (— · ·	6.2 NA					
STREET ADDRESS				reet address	;			ļ
CATO OT 740			•	W OF 7th				1

14. 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 legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chanced, or on an attachment with an address.

(561)968-9653