

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P98000021451**

1. Corporation Name

**MR. ROOTER OF LEE COUNTY, INC.**

Principal Place of Business  
**2323 DEL PRADO BLVD. STE 7  
CAPE CORAL FL 33990**

Mailing Address  
**2323 DEL PRADO BLVD. STE 7  
CAPE CORAL FL 33990**

**FILED**  
**Jul 27, 1999 8:00 am**  
**Secretary of State**

07-27-1999 90030 025 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**03/04/1998**

4. FEI Number

**65-0818-488**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

8. This corporation owes the current year  
Intangible Personal Property. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**GARNER, GEORGE SCOTT  
2323 DEL PRADO BLVD, STE 7  
CAPE CORAL FL 33990**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE  
NAME **GARNER, GEORGE SCOTT**  
STREET ADDRESS **2323 DEL PRADO BLVD, STE 7**  
CITY-ST-ZIP **CAPE CORAL FL 33990**

TITLE **Vice President** ☐ DELETE  
NAME **Tina Garner**  
STREET ADDRESS **2323 Del Prado Blvd, STE 7**  
CITY-ST-ZIP **CAPE CORAL FL 33990**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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 changed, or on an attachment with an address.

SIGNATURE:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/99)

0098729



AMERICA'S TROUBLE SHOOTER

**Mr. Rooter**

**EXPERT PLUMBING  
SERVICES**

2323 Delprado Blvd  
Suite #7  
Cape Coral FL 33990

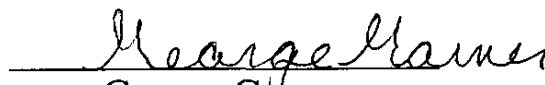
P98000021451 -  
596838-900302E

July 15, 1999

To Whom It May Concern:

I am writing this letter to let you know that I did not receive the first notice for the renewal of the corporation. I am inclosing a check for the amount of \$150.00. If there is a problem with this please let me know promptly so that we can reconcile this as soon as possible. I can be reached at any one of the phone numbers below and or the address above

Thank you,

  
George Garner

936-8862  
1-800-767-3133

[www.mrrooter.com/capecoral](http://www.mrrooter.com/capecoral)  
FULLY EQUIPPED, RADIO DISPATCHED TRUCKS  
FAST, 24 HOUR . . . 7 DAY SERVICE



VISA MASTERCARD DISCOVER

574-3133  
Fax 573-6339