05-04-1999 90202 020 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P98000095742

1. Corporation Name

I & C PLUMBING CORP.

			-				- I 18815881 FIN 18101 (BIF) MUNI 4011 ANII ANII ANII ANII ANII ANII ANII AN		
Principal Place of Business Mailing Address			•	•					
1271 W 33RD ST 1271 W 33RD									
HIALEAH FL 33012		HIALEAH FL 33012	HIALEAH FL 33012				DO NOT WRITE IN THIS SPACE		
						ŀ	3. Date Incorporated or Qualifed		
							11/13/1998		
2. Principal Pla	ace of Business	2a. Mailing Address	2a. Mailing Address				4. FEI Number Applied For		
21		26	26				65-0876014 Not Applicable		
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired See Required		
22		27					5. Certificate of Status Desired Fee Required		
City & State		City & State	City & State				6. Election Campaign Financing \$5.00 May Be		
23		28	28			Trust Fund Contribution Added to Fees			
Zip	Country	Žip	Cou	ıntry	f		8. This corporation owes the current year Intangible		
24	25	29	30				Personal Property Tax. Yes No		
	g. Name and Address of Cur	rrent Registered Agent		ļ.,			10. Name and Address of New Registered Agent		
	 .			81	Na	lame			
CRUZ, ISRAEL				82 Street Address			ress (P.O. Box Number is Not Acceptable)		
1271 W 33RD ST HIALEAH FL 33012			-	Street Address		000 (1.0. Box (1.0.)			
HIALEAH FL 33012				83					
					igspace				
				84	Ci	ity	FL 85 Zip Code		
44 Durayant t	to the provisions of Sections 607	0502 and 607 1508 Florida S	tatutes the a	hove	e-na	amed corpor	oration submits this statement for the purpose of changing its registered		
office or re	edistered agent or both in the St	ate of Florida. Such change W	as autnorize	עם נ	' tne	corporation	on's board of directors. I hereby accept the appointment as registered		
agent. I ar	n familiar with, and accept the ob	ligations of, Section 607.0505	, Florida Stat	utes	i.				
SIGNATURE	Signature, typed or printed name of registered		NOTE: Bogietoro	1 Agor	nt eior	nature secuired u	d when reinstating) DATE		
		AND DIRECTORS	13.	, Agei	in Jigi	ilatoro roquiros r	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE		DELET		TLE			☐ Change ☐ Addition		
j	Pr.		1.2 N						
NAME	ISRAEL CRUZ				TADE	ORESS			
STREET ADDRESS 1271 West 33rd St						1			
CITY-ST-ZIP	Hialeah, Florid	da 33012 □ DELET			ST-ZIP		☐ Change ☐ Addition		
TITLE	V/P	_	_		2.1 TITLE				
NAME	ANICETO COLLA								
STREET ADDRESS 1271 West 33rd			2.3 S	2.3 STREET ADDRESS		DRESS			
CITY-ST-ZIP	Hialeah, Florid	<u>da 33012 </u>			ST-ZIF	P	☐ Change ☐ Addition		
TITLE		☐ DELET	E 3.1 T	πLE			Change Addition		
NAME	-		3.2 N	AME					
STREET ADDRESS			3.3 S	TREET	T ADD	DRESS			
CITY-ST-ZIP		·		TY-S	ST-ZIF	Р			
ΠΤ∟E		☐ DELET	E 4.1 T	MLE			☐ Change ☐ Addition		
NAME	i		4.21	IAME					
STREET ADDRESS			4.3 S	TREE	T ADE	DRESS			
CITY-ST-ZIP			4.4 C	ITY-S	ST-ZIP	P			
TITLE		☐ DELET	E 5.1 T	TLE			☐ Change ☐ Addition		
NAME			5.2 N	AME					
STREET ADDRESS			5.3 S	TREET	TADE	DRESS			
CITY-ST-ZIP			5.4 C	ITY-\$	ST-ZIP	P			
TITLE		☐ DELET	E 6.1 T	ITLE		7 1	Change Addition		
NAME	•	·	6.2 N	AME		,			
STREET ADDRESS			6.3 S	TREE	TADO	DRESS			

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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS