

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S60092 (1)

1. Corporation Name
CORAL PLUMBING, INC.



Principal Place of Business
2204 NW 14TH WAY
BOYNTON BEACH FL 33436
US

Mailing Address
2204 NW 14TH WAY
BOYNTON BEACH FL 33436
US

3. Date Incorporated or Qualified 06/13/1991 3a. Date of Last Report 02/16/1995

2. Principal Place of Business 21 73 NOTTINGHAM LANE 22 Suite, Apt. #, etc. 26 73 NOTTINGHAM LANE 27 Suite, Apt. #, etc.

22 City & State 23 INGLIS FL 27 City & State 28 INGLIS FL 29 Zip 30 34449 25 Country 29 34449 30 Country

4. FEI Number 65-0270076 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 has liability for intangible tax under s 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

LARSON, GRETA
2204 NW 14TH WAY
BOYNTON BEACH FL 33436

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 73 NOTTINGHAM LANE
84 City INGLIS FL 85 Zip Code 34449

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 re-stating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LARSON, GRETA	1.2 NAME	
STREET ADDRESS	2204 NW 14TH WAY	1.3 STREET ADDRESS	73 NOTTINGHAM LANE
CITY-ST-ZIP	BOYNTON BEACH FL	1.4 CITY-ST-ZIP	INGLIS FL 34449-9732
TITLE	VSD	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DONATELLI, BRETT	2.2 NAME	
STREET ADDRESS	2204 NW 14TH WAY	2.3 STREET ADDRESS	73 NOTTINGHAM LANE
CITY-ST-ZIP	BOYNTON BEACH FL	2.4 CITY-ST-ZIP	INGLIS FL 34449-9732
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/29/96 (352) 447-0058
Date Daytime Phone #

CR2E034 (12/95)