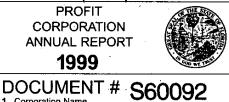
## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## **FILED** Feb 05, 1999 8:00am **Secretary of State**

02-05-1999 90017 020 \*\*\*150.00



DO'NOT WRITE IN THIS SPACE

CORAL PLUMBING, INC.

Principal Place of Business Mailing Address 73 NOTTINGHAM LANE 73 NOTTINGHAM LANE INGLIS FL 34449 INGLIS FL 34449 HS 2. Principal Place of Business 2a. Mailing Address 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.

9. Name and Address of Current Registered Agent

City & State City & State Zip Country 25 30

6. Election Campaign Financing Trust Fund Contribution 8. This corporation owes the current year Intangible Personal Property Tax.

\$5.00 May Be

Added to Fees

\$8.75 Additional

Fee Required →

Applied For

Not Applicable

LARSON, GRETA 100773 NOTTINGHAM LANE INGLIS FL 34449

22

23

24

10. Name and Address of New Registered Agent		
	81	Name -
	82	Street Address (P.O. Box Number is Not Acceptable)
	83	
	84	City 85 Zip Code

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

06/13/1991 4. FEI Number

65-0270076

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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature require en reinstating) 💸 👯 🚓 🥕 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ DELETE TITLE 1.1 TITLE Change Addition 3.2 (\$ 4.3) (\$ 1.2) LARSON, GRETA NAME 1.2 NAME 73 NOTTINGHAM LANE STREET ADDRESS 1.3 STREET ADDRESS INGLIS FL CITY-ST-ZIP 1.4 CITY-ST-ZIP ☐ DELETE TITLE **VSD** 2.1 TITLE ☐ Change ☐ Addition DONATELLI, BRETT 2.2 NAME NAME **73 NOTTINGHAM LANE** STREET ADDRESS 2.3 STREET ADDRESS **INGLIS FL** 2. 4 CITY-ST-ZIP ☐ DELETE 3.1 TITLE Change ☐ Addition HA, WELLING 3.3 STREET ADDRESS 移程 "湖南 CITY-ST-ZIP 3.4. CITY-ST-ZIP ☐ DELETE 4.1 TITLE 4.2 NAME 73 1 77 10 66 78 175 STREET ADDRESS MOLD IT SHALL 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP □ DELETE Addition TITI F 51 TITLE 5.2 NAME NAME 5.3 STREET ADORESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 6.1 TITLE ☐ Addition TO BONDERSON LONG NAME 6.2 NAME NOTE IT STREET ADORESS 6.3 STREET ADDRESS CITY-ST-ZIP 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 with an address, with all other like empowered.

CR2E034 (11/98)