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 #

(3)

J & A PLUMBING INC.

Principal Place of Business

Mailing Address

FILED Feb 11 1998 8:00am Secretary of State

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6301 S.W. 149 COURT 6301 S.W. 149 COURT MIAMI FL 33193 MIAMI FL 33193						
				DO NOT WRITE IN THIS	SPACE	
				3. Date Incorporated or Qualified		
2. Principal P	lace of Business	2a. Mailing Address		01/07/1992 4. FEI Number	Applied For	
<u> </u>		RAC 36 14157 S.W.	ATH TERRA		Not Applicable	
Suite, Apt.	#, etc.	Suile, Apt. #, etc.	OIN IEKKA		\$8.75 Additional	
22		27		5. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23 MIAMI			RIDA	Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has paid the cu		
24 33184			30	Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No	
04 11						
,	Z, EDELMIRO GIL		, , ,			
6301 S.W 149 COURT 82 Street Add MIAMI FL 33193 14157				ddress (P.O. Box Number is Not Acceptable) 5.7 S.W. 8TH TERRACE		
min	IMI EL 23 (83		OTH TERRACE	·		
			84 City	IIAMI FL	2ip Code 33184	
11. Pursuant	to the provisions of Sections 607.0	0502 and 607.1508, Florida Statutes	s, the above-named	corporation submits this statement for the purpose of	of changing its registered	
office or r	egi s tered agent, or both, in the St m fam iliar with, and accept the ob	ate of Florida. Such change was au oligations of, Section 607.0505, Flor	uthorized by the corp rida Statutes	poration's board of directors. I hereby accept the app	pointment as registered	
SIGNATURE	•					
	Signature typed or printed name of registered		Registered Agent signature			
12.	OFFICERS	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	P PIAZ FOELLUDO ON	☐ DELETE	1.1 TITLE		Change	
NAME	DIAZ, EDELMIRO GIL		1.2 NAME	14157 S.W. 8TH TERRACE	,	
STREET ADDRESS	6301 S.W. 149 COURT MIAMI FL 33193		1.3 STREET ADDRESS	MIAMI, FLORIDA 33184	'	
CITY-\$T-ZIP TITLE	MIAMI FL 33183	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	MIAMI, FLORIDA 33104	☐ Change ☐ Addition	
NAME			2.2 NAME		Onlings Addition	
STREET ADDRESS			2.3 STREET ADDRESS		1	
CITY-ST-ZIP			2 4 CITY-ST-ZIP			
TITLE		DELETE	31 TITLE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY - ST - ZIP			
TITLE		☐ DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME		1	
STREET ADDRESS			4.3 STREE1 ADDRESS]	
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		DELETE	5.1 TITLE		Change L. Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP		☐ DELETE	5.4 CITY - ST - ZIP		Change Addition	
TITLE			6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP		····	6 4 CHY-ST-ZIP			

14. Thereby 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.

EDELMIRO G.DIAZ FEB.4.1998 305-222-8388