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

	. HOW. I ILING I LL A	NI ILIN MIKI TOT	10 ψυυ	0.00					
PROFIT FLORIDA DEPARTMENT OF STATE									
1	CORPORATION Sandra Briffeetham					FILED			
ſ	UAL REPORT Secretary of Stale					PHLED			
1998 DIVISION OF CORPORATIONS						98 AUG 10 AM 8: 16			
DOCUI	MENT # V30962	2 (7)				i Pakerang na St.	A T II		
		- (,,				ALGNEYARG OF STA TALLAHASSEE, FLO	RIDA		
COOK	PLUMBING, INC.					I läigit ättkää tiele gotta amio ättiä aini ätäli ain	hi Bidih dibih bibli di	1811 1881	
	f.								
Principal Plac	e of Business	Mailing Address				A TUMBIA MATURUN TITITI NORTHU ANTIR ATRIA TITUR MEDIRA BIDA Tumbia	ii 01011 01011 01011 01	IBH 1861	
5820 14TH AVE 8W 4290 11TH AVENUE SW									
NAPLES FL 3	S FL 34118 NAPLES FL 33999					DO NOT WRITE IN THI <b>S S</b> PACE			
						3. Date Incorporated or Qualified			
A Principal P	Tage of Business A	On Mailing Address				04/20/1992 4. FEI Number			
21 633	194 Ave Su	28. Mailing Address	1444	Ave S	7. ]	65-0337699	- + ·- <u>-</u>	lied For Applicable	
Suite, Apt.		Suite, Apt. #, etc.		1.00	<u>~</u>	5. Certificate of Status Desired	\$8.75 Ad	<del></del>	
22	<b>——</b>	27					Fee Requ		
City & State	les FL	City & State	FI			6. Election Campaign Financing Trust Fund Contribution	\$5.00 M Added to		
Zip	Country	Zip	Cour	ntry		8. This corporation owes or has paid the cu			
24 34	116 25	29 34/16	30				Yes 🔲	No	
	9. Name and Address of Currer	it Registered Agent		81 Name		10. Name and Address of New Registered	Agent		
STEMANI, JAMES U JA									
1805 COUNTY ROAD 951 \$					Addres	ss (P.O. Box Number is Not Acceptable)			
GOLDEN GATE FL 33999									
			}	B4 City			85 Zip Co	nde	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Stat	ules, the ab	ove-named	corpo	ration submits this statement for the purpose	of changing its r	registered	
agent. I a	<b>egis</b> tered agent, or both, in the State <b>m fa</b> miliar with, and accept the oblig	of Florida, Such change was ations of, Section 607,0505, I	s authorized Florida Stati	by the corp ites.	ooratio	n's board of directors. I hereby accept the ap	pointment as re	gistered	
SIGNATURE	Signature, typed or printed name of registered agr	and follows applicable. (All	OIE Popirtored	Acont signature	required	when reinstating) DATE			
12.	OFFICERS AN	<del></del>	13.	- gen agnatur	regonde	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS	IN 12 Addition	
TITLE	D	☐ DELETE	1.17(1)	.E			Change	Addition	
NAME	COOK, ROBERT D		1,2 NA		,	221 1141 1			
STREET ADDRESS	4290 11TH AVENUE SW NAPLES FL			EET ADDRESS Y-ST-ZIP	6	331 14th Ave SW Aples FL 34116		ļ	
CITY-ST-ZIP TITLE	_IM LLO I L	DEL <b>et</b> e	2.1 TIT		/~	Apres PC 34116	Change	Addition	
NAME			2.2 NA	AE .					
STREET ADDRESS			2.3 STF	EFT ADDRESS					
CITY-S1-ZIP TITLE		DELETE	2. 4 CIT	Y-ST-ZIP		<u>=00002515</u>		Addition	
NAME		[ ] occup	3.1 IIII			****400.00	****400	ī.00	
STREET ADDRESS				EE1 ADDRESS				[	
CITY-ST-ZIP				Y-ST-ZIP			·		
THLE		☐ DELETE	4.1 111			sooopagij§	/ LDM級  	L±HA¶di∭on   D⊇	
NAME STREET ADDRESS			4. 2 NA 4.3 STE	me Eet address		5000026 <b>16</b> -08/14/980 ****150.0 <b>0</b>	****150		
CITY-ST-ZIP				r-ST-ZIP				,	
TITLE		DELETE	5.1 7(1)				Change	Addition	
NAME			5.2 NA						
STREET ADDRESS				EE1 ADDRESS			۲	/ 2	
CITY-ST-ZIP TITLE		DELETE	6.1 TIT	(-ST-ZIP .E			☐ Chang(CA)	May 15	
NAME			6.2 NA	AE '	l			. <u>'</u> 0140	
STREET ADDRESS			6.3 STF	EET ADDRESS			(A)	$h_{\sim}$ .	
CitY-ST-ZiP	satify that the information equalised	ith this bling does not qualify		r-ST-ZIP	nd in C	ection 119.07(3)(i), Florida Statutes. I further c	ertify that the in	formation	
i indicated	On this annual report or supplementa	al annual report is true and ac	ccurate and	that my sig	nature	shall have the same legal effect as if made u	inder oath: that l	lam an I	
Block 12	airector of the corporation or the reci or Block 13 if changed,⊸r-on an atta	aver or trustee empowered to	o execute ti	iis report as	requir	red by Chapter 607, Florida Statutes; and that	шу паше арре	iais ifi	