## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# V40461

HILL, ALBERT

673 NW 118 ST

MIAMI, FL 33168

673 NW 118 ST

MIAMI, FL 33168

() Delete

COLEMAN, JACQUELINE

Name:

Title:

Name: Address:

Address:

City-St-Zip:

City-St-Zip:

Entity Name: AL HILL PLUMBING CORPORATION

FILED Feb 26, 2002 8:00 AM Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 673 NW 118TH STREET MIAMI, FL 33168 **Current Mailing Address: New Mailing Address:** 673 NW 118TH STREET MIAMI, FL 33168 FEI Number: 65-0339665 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COLEMAN, JACQUELINE 673 N.W. 118TH ST MIAMI, FL 33168 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition HILL, TAMMY Y., Name: Name: HILL, TAMMY Y., 1970 NW 175TH ST. 673 NW 118TH STREET Address: Address: City-St-Zip: MIAMI, FL 33056 City-St-Zip: MIAMI, FL 33168 Title: Title: (X) Change ( ) Addition () Delete HILL, TAMMY Y., Name: Name: COLEMAN, JACQUELINE, L 1970 NW 175TH ST. 673 NW 118TH STREET Address: Address: MIAMI, FL 33056 MIAMI, FL 33168 City-St-Zip: City-St-Zip: (X) Change ( ) Addition Title: ( ) Delete Title: PD

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

HILL, ALBERT

673 NW 118 ST

MIAMI, FL 33168

() Change () Addition

SIGNATURE: JACQUELINE L COLEMAN V 02/26/2002