

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

FILED
Feb 18, 1999 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V58970

1. Corporation Name
R&K PLUMBING, INC.

02-18-1999 90117 003 ****150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
08/19/1992

4. FEI Number
65-0355253

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 owes the current year Intangible Personal Property Tax. Yes No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

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9. Name and Address of Current Registered Agent

SCHROEDER, NORMAN L., III
101 NORTH 'J' STREET
SUITE 1
LAKE WORTH FL 33460

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

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 reinstating)

2. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DELETED	1.1 TITLE	Change Addition
P WILSON, RANDY K 328 PLYMOUTH, RD WEST PALM BCH FL	<input type="checkbox"/>	1.2 NAME	<input type="checkbox"/>
ST STEPHENSON, ROBERT K 9600 SE POINT TERRACE JUPITER FL	<input type="checkbox"/>	1.3 STREET ADDRESS	<input type="checkbox"/>
	<input type="checkbox"/>	1.4 CITY-ST-ZIP	<input type="checkbox"/>
	<input type="checkbox"/>	2.1 TITLE	<input type="checkbox"/>
	<input type="checkbox"/>	2.2 NAME	<input type="checkbox"/>
	<input type="checkbox"/>	2.3 STREET ADDRESS	<input type="checkbox"/>
	<input type="checkbox"/>	2.4 CITY-ST-ZIP	<input type="checkbox"/>
	<input type="checkbox"/>	3.1 TITLE	<input type="checkbox"/>
	<input type="checkbox"/>	3.2 NAME	<input type="checkbox"/>
	<input type="checkbox"/>	3.3 STREET ADDRESS	<input type="checkbox"/>
	<input type="checkbox"/>	3.4 CITY-ST-ZIP	<input type="checkbox"/>
	<input type="checkbox"/>	4.1 TITLE	<input type="checkbox"/>
	<input type="checkbox"/>	4.2 NAME	<input type="checkbox"/>
	<input type="checkbox"/>	4.3 STREET ADDRESS	<input type="checkbox"/>
	<input type="checkbox"/>	4.4 CITY-ST-ZIP	<input type="checkbox"/>
	<input type="checkbox"/>	5.1 TITLE	<input type="checkbox"/>
	<input type="checkbox"/>	5.2 NAME	<input type="checkbox"/>
	<input type="checkbox"/>	5.3 STREET ADDRESS	<input type="checkbox"/>
	<input type="checkbox"/>	5.4 CITY-ST-ZIP	<input type="checkbox"/>
	<input type="checkbox"/>	6.1 TITLE	<input type="checkbox"/>
	<input type="checkbox"/>	6.2 NAME	<input type="checkbox"/>
	<input type="checkbox"/>	6.3 STREET ADDRESS	<input type="checkbox"/>
	<input type="checkbox"/>	6.4 CITY-ST-ZIP	<input type="checkbox"/>

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 Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Robert K Stephenson* Robert K Stephenson 1/29/99

CR2E034 (11/98)