FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

V60844

(0)

KEITH'S PLUMBING SERVICE AND DRAIN CLEANING, INC

Principal Place of Business

Mailing Address

6116 ISLA STREET WEST MELBOURNE FL 32904 6116 ISLA STREET WEST MELBOURNE FL 32904



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								3. Date Incorpor 08/31/1		ualified	3a. Date	of Last I 1/13/1	
2. Principal Pla	ace of Busine	ess	2a, Mailing Addres	a, Mailing Address				4. FEI Number	40440				Applied For
21			26	26				59-31	<u>42143</u>				Not Applicable
Suite, Apt. #	#, etc.		Suite, Apt. #, e	Suite, Apt. #, etc.				5. Certificate of Status Desired Security Securi					
City & State	· · · · · · · · · · · · · · · · · · ·		City & State	City & State				6. Election Cam	paign Fina	ncing	F-1	\$5.0	00 May Be
23			28]				Trust Fund Co	ontribution	1		Add	ed to Fees
Zip		Country	Zip	⊢ ¬	Country			8, This corporat				cunder :	s 199.032,
24		25	29	30	L			Florida Statutes Yes No 10. Name and Address of New Registered Agent					
	9. Name	and Address of C	Current Registered Agent		04	г.,		10. Name and A	ddress	I New H	egistered A	gent	
					81	ľ	lame						
KOPP,				82 Street Add			treet Addres	s (P.O. Box Numb	er is Not A	Acceptab	le)		
	sla strei											-	
WEST	MELBOUR	NE FL 32904			83								
					84	6	City					85 2	2ip Code
			·			Ĺ					<u>FL</u>	بلبل	
11. Pursuant t	to the provisi	ions of Sections 607	7.0502 and 607.1508, Florida S of Florida. Such change was au	Statutes, the	above-r	nam Ozal	ned corporati	ion submits this standard in the standard in t	atement fo by accent	r the pur the appo	pose of cha pintment as	nging Its reaistere	registered office ed agent. I am
familiar wit	th, and acce	pt the obligations of	f, Section 607.0505, Florida St	atutes.	ino corp	ora	don's board	or directors. Triore	by hooop	trio appr		09.010.0	a agomi i am
SIGNATURE	Slocal ire typed	or printed name of register	ed agent and title if applicable.	(NOTE: Regis	stered Agen	nt sig	nature required w	when reinstating)			DATE		
12.			RS AND DIRECTORS		13.			ADDITIONS/0	HANGES	TO OFFI	CERS AND	DIRECT	ORS IN 12
TITLE	D	☐ DELETE 1.		1. 1 TITLE) Change	Addition	
NAME	KOPP, KEITH			1.2 NAME									
STREET ADDRESS	ADDRESS 6116 ISLA STREET			1.3 STF		ADE	ORESS						
CITY-ST-ZIP	W MELBOURNE FL			1		1.4 CITY-ST-ZIP							
THILF	D		DELET	DELETE 2. 1 TITI		.E] Change	Addition
NAME	KOPP	, VIRGINIA			2.2 NAME								
STREET ADDRESS	6116	ISLA STREET			2.3 STREET	ADE	DRESS						
CITY-ST-ZIP	W ME	LBOURNE FL		2 4 CHY-ST-ZIP		IΡ							
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CITY - ST - ZIP					3.4 CITY - S	31 - 21	IP .						
TITLE			☐ DELET	E	4. 1 TITLE] Change	: 🔲 Addition
NAME					4.2 NAME								
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TITLE			DELET	E	6 1 TITLE] Change	Addition
NAME					6.2 NAME								
STREET ADDRESS					6 3 STREET	T ADI	DRESS						
CITY-ST-ZIP					6.4 CITY-5	ST - Z	nP						
14 I do hereb	v certify that	t the information sur	onlied with this filing is voluntar					the exemption sta	ted in Sec	tion 119	.07(3)(k). Flo	rida Stat	utes. I further

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 cath; 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.

SIGNATURE

BIGNATURE AND TYPED OR SOMEON NAME OF SIGNING OFFICER OR SPECTOR

4/24/86 407-7236

JRZE034 (12