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

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

DOCUMENT : 1. Corporation Name	ŧ

SIGNATURE:

V69445

DOLPHIN PLUMBING, AIR CONDITIONING AND REFRIGERA

TION, INC.					
Principal Place	of Business	Mailing Address		- I I BARL BILLEN DELLA DELLA DIALI BILLO (<u> 1841 Bibit Bibit Bibit Gibit Bibit 1891</u>
460 11TH S HOLLY HILI US		460 11TH ST #F HOLLY HILL FL 32 US	117		AN
		••		3. Date Incorporated or Qualified 3a. 1 10/05/1992	Date of Last Report
2. Principal Pla	ce of Business	2a. Mailing Address		4. FEI Number	04/18/1995 Applied For
21		26		59-3147691	Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22		27			Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Z ip	Country	28	Country	11001101100011	Added to Fees
24	25	Zip 29	Country 30	6. This corporation has liability for intangib Florida Statutes ☐ Yes ☐ No	•
- 1	9. Name and Address of Curre			10. Name and Address of New Register	
			81 Name		
PERNIC	CKA, EDWARD J.		82 Street Add	tress (P.O. Box Number is Not Acceptable)	
	TH ST #F		62 Stiest Add	iress (r. O. Box Namber is Not Acceptable)	
	HILL FL 32117		83		
			84 City		85 Zip Code
44 6				<u> </u>	-L
familiar with	id agent, or both, in the State of Flor i, and accept the obligations of, Sec	ida. Such change was a ilbori	zed hy the comporation's had	ration submits this statement for the purpose of and of directors. Thereby accept the appointmen	t as registered agent. I am
SIGNATURE _	Signature, types or printed har in of regularied agen	tarothetappositie (N	ritte. Bog steech Agent signature resort	(A) white remarks the	
12.	OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D	☐ DELETE	1 1 TITLE		Change Addition
NAME	ROCHE, JOSEPH T.		1.2 NAME		
STREET ADDRESS	460 11 ST		1.3 STREET ADDRESS		
CITY-ST-ZIP	HOLLY HILL FL		1.4 CITY - ST - ZIP		
TITLE	D	DELF TE	2 1 TITLE		Change Addition
NAME STREET ADDRESS	PERNICKA, EDWARD J.		2.2 NAME		
CITY-ST-ZIP	460 11 ST Holly Hill FL		2.3 STREET ADDRESS		
TITLE	NOLT BILL FL	☐ DELETE	2 4 CITY - S1 - ZIP 3 1 TITLE		☐ Change ☐ Addition
NAME			3 2 NAME		
STREET ADDRESS			3.3 STHEFT ADDRESS		
CITY-S1-ZIP			3.4 C/TY - ST - 7/P		
TITLE	,	☐ DELETÉ	4 1 TITLE		Change Addition
NAME			4.2 NAM:		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4 4 CITY - ST - ZIP	·	
TITLE		☐ DELFTE	5 1 TITLE		Change Addition
NAME expect annouse			5 2 NAME		
STREET ADDRESS CITY-ST-ZIP			5 3 STHEET ADORESS		
THILE		DELETE	5 4 CHY-S1-2IF 6 1 THUE		Change Addition
NAME		<u></u>	6.2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CITY-ST-2IP			64 CITY ST-ZIP		
14. I do hereby	certify that the information supplied	with this filing is voluntarily for	nished and does not out for	or the exemption stated in Section 119.07(3)(k), ate and that my signature shall have the same le	Florida Statutes, I further
oatn; that i	am an officer or director of the corpo Block 12 or Block 13 if changed, or	oration or the receiver or truste	ee emnowered to execute th	ate and that my signature shall have the same le as report as required by Chapter 607, Florida Sta	gal effect as if made under atules; and that my name

4-17-96 9042534675