2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2007 08:00 AM
Secretary of State

DOCUMENT # P03000002737

1. Entity Name
V & D PLUMBING SERVICES, INC.

Principal Place of Business
14266 SW 162 STREET
MIAMI, FL 33177

Mailing Address
14266 SW 162 STREET
MIAMI, FL 33177

01192007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 71-0936009 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DIAZ, VICTOR M
14266 SW 162 STREET
MIAMI, FL 33177

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	DIAZ, VICTOR M
STREET ADDRESS	14266 SW 162 STREET
CITY-ST-ZIP	MIAMI, FL 33177
TITLE	V
NAME	MILIAN, ROBERTO L
STREET ADDRESS	6418 NW 200 TERR
CITY-ST-ZIP	MIAMI, FL 33015
TITLE	S
NAME	DIAZ, DANIA 6418 NW
STREET ADDRESS	6418 NW 200 TERR
CITY-ST-ZIP	MIAMI, FL 33015
TITLE	SOFB
NAME	DIAZ, DORA M
STREET ADDRESS	14266 SW 162 STREET
CITY-ST-ZIP	MIAMI, FL 33177
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/26/07-80112-022-150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X _____ 1·23·07 (305) 232-8950
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #