2007 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Feb 01, 2007 08:00 AM DOCUMENT # P03000128128 **Secretary of State** JOSEPH CAROSONE PLUMBING CO., INC. Principal Place of Business Mailing Address 4480-B NUTMEG TREE LN 4480-B NUTMEG TREE LN BOYNTON BCH, FL 33436 BOYNTON BCH, FL 33436 01272007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0389178 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CAROSONE, JOSEPH DO NOT WRITE 4480-B NUTMEG TREE LN BOYNTON BCH, FL 33436 IN THIS SPACE 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 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 **\$5.00** May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE CAROSONE, JOSEPH NAME STREET ADDRESS 4480-B NUTMEG TREE LN U000000614775 CITY-ST-702 BOYNTON BCH, FL 33436 02/08/07-80045-002 150.0d TITLE NAME STREET ADDRESS City-St-7iP TITLE NAME STREET ADDRESS DO NOT WRITE City-St-7/6 TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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 seme 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:

TITLE NAME STREET ADDRESS City-ST-ZIP

9.07

56. 4682