

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000099058

Entity Name: 4 STAR PLUMBING, INC.

FILED  
Apr 11, 2008  
Secretary of State

**Current Principal Place of Business:**

5691 NE 14TH AVENUE  
FORT LAUDERDALE, FL 33334

**New Principal Place of Business:**

**Current Mailing Address:**

5691 NE 14TH AVENUE  
FORT LAUDERDALE, FL 33334

**New Mailing Address:**

FEI Number: 65-0795177      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FRANZONE, AUDREY M  
7988 EXETER BLVD. WEST  
TAMARAC, FL 33321      US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: THEODORE, HASLE S III  
Address: 1461 NE 57 PLACE  
City-St-Zip: FORT LAUDERDALE, FL 33334

Title: V ( ) Delete  
Name: FRANZONE, AUDREY  
Address: 7988 EXETER BLVD W  
City-St-Zip: TAMARAC, FL 33321

Title: S ( ) Delete  
Name: SMITH, ERIC  
Address: 847 W PLANTATION CIRCLE  
City-St-Zip: PLANTATION, FL 33324

Title: T ( ) Delete  
Name: ROBERT, O' BRIEN  
Address: 1331 SW 115TH AVE  
City-St-Zip: PLANTATION, FL 33325

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: HASLE, THEODORE S III  
Address: 1461 NE 57 PLACE  
City-St-Zip: FORT LAUDERDALE, FL 33334

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Change (X) Addition  
Name: SMITH, ERIC A  
Address: 847 W. PLANTATION CIRCLE  
City-St-Zip: PLANTATION, FL 33324

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AUDREY FRANZONE

V

04/11/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date