

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000017433		
1. Entity Name ABDOW PLUMBING, INC.		
Principal Place of Business 2139 SE 8 AVE CAPE CORAL, FL 33990		Mailing Address P O BOX 150656 CAPE CORAL, FL 33915
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent ABDOW, ROBERT 2139 SE 8 AVE. CAPE CORAL, FL 33990		DO NOT WRITE 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: <i>Robert Abdow</i> Signature, typed or printed name of registered agent also file if applicable. (NOTS Registered Agent signature required when transferring)		DATE: <i>7-11-2008</i>
FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		In accordance with s. 607.193(2)(b), F.S., this corporation did not receive the prior notice.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ABDOW, ROBERT 2139 SE 8 AVE CAPE CORAL, FL 33990	DO NOT WRITE IN THIS SPACE
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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: <i>Robert Abdow</i> SIGNATURE AND TYPED OR PRINTED NAME OF SERVING OFFICER OR DIRECTOR		<i>ROBERT ABDOW</i> <i>7-11-2008</i>

FILED
Jul 16, 2008 08:00 AM
Secretary of State



07102008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0892271	Applied For Not Applicable
5. Certificate of Status Cashed ☐ \$8.75 Additional Fee Required	

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07/16/08-80006-019-158.75