2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000143374

Entity Name: PLUMBING BY DESIGN, INC.

FILED Apr 26, 2006 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

9720 W ELM LANE 970 ST LUCIE WEST BLVD MIRAMAR, FL 33025 PORT ST LUCIE, FL 34986

Current Mailing Address: New Mailing Address:

9720 W ELM LANE 970 ST LUCIE WEST BLVD MIRAMAR, FL 33025 PORT ST LUCIE, FL 34986

FEI Number: 56-2421209 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CAMPBELL, LORENZO A
9720 W ELM LANE
MIRAMAR, FL 33025
US

CAMPBELL, LORENZO A
423 SW LEONA DR.
PORT ST LUCIE, FL 34953
US

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: 04/26/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

() Delete Title: VP (X) Change () Addition

 Name:
 CAMPBELL, LÓRENZO A
 Name:
 CAMPBELL, LÓRENZO A

 Address:
 9720 W ELM LANE
 Address:
 423 SW LEONA DRIVE

 City-St-Zip:
 MIRAMAR, FL 33025
 City-St-Zip:
 PORT ST LUCIE, FL 34953

Title: VST () Delete Title: PST (X) Change () Addition Name: RYNKIEWICZ, GWENDOLYNNE S Address: 4101 WOODLAND DRIVE PST (X) Change () Addition Name: RYNKIEWICZ, GWENDOLYNNE S Address: 4101 WOODLAND DRIVE

Address: 4101 WOODLAND DRIVE Address: 4101 WOODLAND DR City-St-Zip: FAIRFAX, VA 22030 City-St-Zip: FAIRFAX, VA 22030

I hereby certify that the information supplied with this filing does not qualify for the 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: GWENDOLYNNE S. RYNKIEWICZ PST 04/26/2006