

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J15438

**Entity Name:** ANDERSON PUMP SERVICE, INC.

**Current Principal Place of Business:**

17890 WEST DIXIE HWY, #315  
NORTH MIAMI BEACH, FL 33160

**Current Mailing Address:**

P.O. BOX 630475  
MIAMI, FL 33163 US

**FEI Number:** 65-1069994

**Certificate of Status Desired:** No

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

THOMAS, MALCOLM  
17890 WEST DIXIE HWY  
N MIAMI BCH, FL 33160 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title PST  
Name THOMAS, MALCOLM  
Address 17890 WEST DIXIE HWY, #315  
City-State-Zip: NORTH MIAMI BEACH FL 33160

*I hereby 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 all other like empowered.*

**SIGNATURE:** MALCOLM THOMAS

PST

02/23/2016

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date