

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000011967

**Entity Name:** ADVANTAGE PLUMBING SYSTEMS, INC

**Current Principal Place of Business:**

301 EAST 10TH AVE  
HIALEAH, FL 33010

**FILED**  
**Apr 19, 2016**  
**Secretary of State**  
**CC3793861780**

**Current Mailing Address:**

301 EAST 10TH AVE  
HIALEAH, FL 33010 US

**FEI Number: 27-1880018**

**Certificate of Status Desired: Yes**

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

RAYON, ALEXANDER  
900 SURFSIDE BLVD  
SURFSIDE, FL 33154 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	PD	Title	SD
Name	RAYON, ALEXANDER	Name	RAYON, ALEXANDER
Address	900 SURFSIDE BLVD	Address	900 SURFSIDE BLVD
City-State-Zip:	SURFSIDE FL 33154	City-State-Zip:	SURFSIDE FL 33154

*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: ALEXANDER RAYON**

**PD**

**04/19/2016**

Electronic Signature of Signing Officer/Director Detail

Date