

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 222072

FILED
Feb 02, 2006
Secretary of State

Entity Name: HERB DAVIS PLUMBING, INC.

Current Principal Place of Business:

911 NW 209TH AVE
108
PEMBROKE PINES, FL 33029 US

New Principal Place of Business:

Current Mailing Address:

911 NW 209TH AVE
SUITE 108
PEMBROKE PINES, FL 33029 US

New Mailing Address:

FEI Number: 59-0866169 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DAVIS, HERBERT W.
911 NW 209TH AVE
SUITE 108
PEMBROKE PINES, FL 33029 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: DAVIS, H.W.,
Address: 911 NW 209TH AVE., SUITE #108
City-St-Zip: PEMBROKE PINES, FL

Title: V () Delete
Name: DAVIS, MARVIN ROY,
Address: 911 NW 209TH AVE., SUITE #108
City-St-Zip: PEMBROKE PINES, FL

Title: ST () Delete
Name: DAVIS, SHERRY L.,
Address: 911 NW 209TH AVE., SUITE #108
City-St-Zip: PEMBROKE PINES, FL

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DAVIS, H.W.,
Address: 911 NW 209TH AVE., SUITE #108
City-St-Zip: PEMBROKE PINES, FL 33029

Title: V (X) Change () Addition
Name: DAVIS, MARVIN ROY, J, R.
Address: 911 NW 209TH AVE., SUITE #108
City-St-Zip: PEMBROKE PINES, FL 33029

Title: ST (X) Change () Addition
Name: DAVIS, SHERRY L.,
Address: 911 NW 209TH AVE., SUITE #108
City-St-Zip: PEMBROKE PINES, FL 33029

Title: V () Change (X) Addition
Name: VALE, PETER F.,
Address: 911 NW 209TH AVE., SUITE #108
City-St-Zip: PEMBROKE PINES, FL 33029

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: MARVIN R. DAVIS, JR.

V

02/02/2006

Electronic Signature of Signing Officer or Director

_____ Date