

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 475593

FILED
Apr 03, 2008
Secretary of State

Entity Name: PINWOOD PLUMBING SUPPLY, INC.

Current Principal Place of Business:

9590 N.W. 7TH AVENUE
MIAMI, FL 33150

New Principal Place of Business:

Current Mailing Address:

9590 N.W. 7TH AVENUE
MIAMI, FL 33150

New Mailing Address:

FEI Number: 59-1593602

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MENSCHER, BARRY H.
9590 N.W. 7TH AVENUE
MIAMI, FL 33150 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: MENSCHER, BARRY H.
Address: 2061 NW 118TH AVE.
City-St-Zip: PLANTATION, FL

Title: ST () Delete
Name: MENSCHER, BARRY H.
Address: 2061 NW 118TH AVE.
City-St-Zip: PLANTATION, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MENSCHER, BARRY H.
Address: 2061 NW 118TH AVE.
City-St-Zip: PLANTATION, FL 33323

Title: ST (X) Change () Addition
Name: MENSCHER, BARRY H.
Address: 2061 NW 118TH AVE.
City-St-Zip: PLANTATION, FL 33323

I hereby certify that the information supplied with this filing does not qualify 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: BARRY H. MENSCHER

PD

04/03/2008

Electronic Signature of Signing Officer or Director

Date