2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #515028

1. Entity Name SEAL-TITE PLUMBING CO.

FILED Jan 22, 2008 08:00 AM Secretary of State

Principal Place of Business

BOYNTON BCH, FL 33435

406 N.E. 3RD AVE BAR # 4&5

Mailing Address

2424 N FEDERAL HWY.

213

BOYNTON BCH, FL 33435



DO NOT WRITE IN THIS SPACE

01182008 No Chg-P CR2E034 (11/05)

Applied For 4. FEI Number 59-1703500 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JONES, STEPHEN 2424 N FEDERAL HWY. APT. 213 **BOYNTON BEACH, FL 33435**

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agen				e required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees			
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PV JONES, STEPHEN 2424 N FEDERAL HWY APT. 213 BOYNTON BEACH, FL. 33435				800000790057 01/23/08-80019-023 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JONES, BECKY K 2424 N FEDERAL HWY. APT. 213 BOYNTON BEACH, FL 33435				0172.900 00013-023 130.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WILLIAM, NESTOR 6267 MADRAS CIRCLE BOYNTON BEACH, FL 33437		DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-SI-ZIP					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under cath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.