

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 565905

**FILED**  
**Jan 09, 2012**  
**Secretary of State**

**Entity Name:** ACTION PLUMBING SUPPLY CO.

**Current Principal Place of Business:**

5411 NW 15 ST  
MARGATE, FL 33063

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 934817  
MARGATE, FL 33093

**New Mailing Address:**

**FEI Number:** 59-1798150

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BERKE, STUART  
5411 NW 15TH STREET  
MARGATE, FL 33063 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

**OFFICERS AND DIRECTORS:**

**Title:** PRES  
**Name:** BERKE, STUART  
**Address:** 21985 PALM GRASS DRIVE  
**City-St-Zip:** BOCA RATON, FL 33428

**Title:** VP  
**Name:** BERKE, KENNETH  
**Address:** 550 OKEECHOBEE BLVD.  
**City-St-Zip:** WEST PALM BEACH, FL 33401

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:** STUART BERKE

MR

01/09/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date