2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 17, 2009
Secretary of State

DOCUMENT# 635088

Entity Name: A-1 AMERICAN PLUMBING, INC.

Current Principal Place of Business:

4361 W. SUNRISE BLVD.
PLANTATION, FL 33313

New Principal Place of Business:

Current Mailing Address:

4361 W. SUNRISE BLVD.
PLANTATION, FL 33313

New Mailing Address:

FEI Number: 59-1935472 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRANT, MICHAEL
4361 W. SUNRISE BLVD.
PLANTATION, FL 33313 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:	D	( ) Delete
Name:	GRANT, DARLENE,	
Address:	2784 NE 24 STREET	
City-St-Zip:	POMPANO BEACH, FL 33064	
Title:	P	( ) Delete
Name:	GRANT, MICHAEL,	
Address:	2784 NE 24 STREET	
City-St-Zip:	POMPANO BEACH, FL 33064	
Title:	D	( ) Delete
Name:	GRANT, MATTHEW	
Address:	2784 NE 24 STREET	
City-St-Zip:	POMPANO BEACH, FL 33064	
Title:	T	( ) Delete
Name:	LEIBOLD, CHERYL	
Address:	5370 NW 29 COURT	
City-St-Zip:	MARGATE, FL 33060	
Title:	D	( ) Delete
Name:	MARCH, THOMAS	
Address:	4213 NW 73 AVENUE	
City-St-Zip:	CORAL SPRINGS, FL 33065	
Title:	D	( ) Delete
Name:	THOMPSON, GEORGE	
Address:	4670 NW 10 PLACE	
City-St-Zip:	PLANTATION, FL 33313	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: MICHAEL GRANT PRES 02/17/2009

Electronic Signature of Signing Officer or Director — Date