2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMEN] 1. Entity Name A RAINALDI PLUMBING, INC.

Principal Place of Business. 6111 OLD CHENEY HIGHWAY ORLANDO, FL 32807

DRLANDO, FL 3280

## **FILED** Mar 23, 2005 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

03212005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2128468

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

407-282-2900

6. Name and Address of Current Registered Agent

RAINALDI, FRANK PAUL 6111 OLD CHENEY HIGHWAY ORLANDO, FL 32807

SIGNATURE:

## 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 Agent signature required when reinstalling)  DATE				
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS	-	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RAINALDI, FRANK PAUL 1545 WATERWITCH DRIVE ORLANDO, FL 32806			UNRNAA274117 U3/23/05-80057-012 158.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T			03/23/US-8UUS/-UIS 158./5
TITLE NAME STREET ADDRESS CITY-57-ZIP	VS PARKS, R. CRAIG 9767 BERRY DEASE ROAD ORLANDO, FL 32825		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN T	HIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			_	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.				

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR