

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F55454

FILED  
Jan 25, 2008  
Secretary of State

Entity Name: MIKE VON STETINA PLUMBING, INC.

## Current Principal Place of Business:

C/O MICHAEL F. VON STETINA  
333 - DR. MARTIN LUTHER KING JR. ST. N.  
ST. PETERSBURG, FL 33701

## New Principal Place of Business:

## Current Mailing Address:

C/O MICHAEL F. VON STETINA  
333 - DR. MARTIN LUTHER KING JR ST. N.  
ST. PETERSBURG, FL 33701

## New Mailing Address:

FEI Number: 59-2139275

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VON STETINA, MICHAEL  
12385 74TH. AVENUE  
SEMINOLE, FL 33772 US

## Name and Address of New Registered Agent:

VON STETINA, MICHAEL F  
12385 74TH. AVENUE  
SEMINOLE, FL 33772 US

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: MICHAEL F. VON STETINA

01/25/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: S ( ) Delete  
Name: VON STETINA, JOANNE  
Address: 12385 74TH. AVENUE  
City-St-Zip: SEMINOLE, FL 33772

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JOANNE VON STETINA

S

01/25/2008

Electronic Signature of Signing Officer or Director

Date