



**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 18, 2005 08:00 AM
Secretary of State

DOCUMENT # G52862 1. Entity Name ART PLUMBING & AIR CONDITIONING, INC.			
Principal Place of Business 12438 WILES ROAD CORAL SPRINGS, FL 33076		Mailing Address 12438 WILES ROAD CORAL SPRINGS, FL 33076	
DO NOT WRITE IN THIS SPACE			
		4. FEI Number 59-2313044	
		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DATTILE, GREGG 11957 NW 53RD CT CORAL SPRINGS, FL 33065			
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 _____ (NOTE Registered Agent signature required when reinstalling) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE U00000311692 04/18/05-80053-021 150.00	
TITLE	PDM		
NAME	D'ATTILE, GREGG		
STREET ADDRESS	565 NW 108TH TERRACE		
CITY-ST-ZIP	CORAL SPRINGS, FL 33076		
TITLE	VDST		
NAME	D'ATTILE, T M		
STREET ADDRESS	5234 NW 109 LANE		
CITY-ST-ZIP	CORAL SPRINGS, FL 33076		
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
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)(f), 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: 		04/10/05 9547521282	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	
MARIE T. DATTILE			