

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G89498

FILED  
Jan 11, 2012  
Secretary of State

**Entity Name:** THE ALERT PLUMBING SERVICE OF ARCADIA, INC.

**Current Principal Place of Business:**

2587 NW PINECREEK AVE  
ARCADIA, FL 34266 US

**New Principal Place of Business:**

**Current Mailing Address:**

2587 NW PINECREEK AVE  
ARCADIA, FL 34266 US

**New Mailing Address:**

**FEI Number:** 59-2428444

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

LEWIS, KARL J  
2587 NW PINECREEK AVE  
ARCADIA, FL 34266 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: P  
Name: LEWIS, KARL J  
Address: 2587 NW PINECREEK AVE  
City-St-Zip: ARCADIA, FL 34266

Title: V  
Name: LEWIS, JERRY R  
Address: 2587 NW PINECREEK AVE  
City-St-Zip: ARCADIA, FL 34266

Title: S  
Name: MARCOVITCH, MARK M  
Address: 2587 NW PINECREEK AVE  
City-St-Zip: ARCADIA, FL 34266

Title: T  
Name: LEWIS, JENNA L  
Address: 2587 NW PINECREEK AVE  
City-St-Zip: ARCADIA, FL 34266

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: KARL LEWIS

P

01/11/2012

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

\_\_\_\_\_  
Date