2007 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Mar 08, 2007 08:00 AM **DOCUMENT # H20168 Secretary of State** 1. Entity Name SANOLI PLUMBING, INC. Principal Place of Business Mailing Address 7955 SW 13TH ST. 7955 SW 13TH ST. MIAMI, FL 33144-5715 US MIAMI, FL 33144-5715 US 03032007 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2446247 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SANCHEZ, FELIPE DO NOT WRITE 7955 SW 13TH ST. MIAMI, FL 33144-5715 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 late if applicable. (NOTE: Registered Agent someture required when rematating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 U00000659292 /16/07-80024-013 150.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS PTD JJJJ. F SANCHEZ, FELIPE STREET ADDRESS 7955 SW 13TH ST. CITY-ST-ZIP MIAMI, FL 33144 TITLE NAME STREET ADDRESS CITY-ST-ZIP TILE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-78 TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the inform indicated on this report or sup of the corporation or the receiphanged, or on an attachment with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information 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 powered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if s, with all other like empowered.

RENTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED