

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H52660

FILED  
Apr 27, 2011  
Secretary of State

**Entity Name:** PROFESSIONAL PIPING SERVICES, INC.

**Current Principal Place of Business:**

30043 STATE ROAD 54 W  
WESLEY CHAPEL, FL 33544 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 7337  
WESLEY CHAPEL, FL 33545 US

**New Mailing Address:**

**FEI Number:** 59-2523188      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

CIMBORA, ROGER M.  
5260 EAGLE BLVD.  
LAND-O-LAKES, FL 34639 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: CIMBORA, ROGER M.  
Address: 5260 EAGLE BLVD.  
City-St-Zip: LAND-O-LAKES, FL

Title: VP  
Name: CIMBORA JR, ROGER M.  
Address: 13109 HAPPY HILL ROAD  
City-St-Zip: DADE CITY, FL 33525

Title: T  
Name: CIMBORA, ALICIA  
Address: 35 ST NICHOLAS TERR #21  
City-St-Zip: NEW YORK CITY, NY 10027

Title: S  
Name: CIMBORA, KATHERINE J  
Address: 9401 FETLOCK CT  
City-St-Zip: CHARLOTTE, NC 28216

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: ROGER M CIMBORA

P

04/27/2011

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

\_\_\_\_\_  
Date