2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 28, 2008 08:00 AI **DOCUMENT # H89944 Secretary of State** 1. Entity Name BELZER PLUMBING, INC. Mailing Address Principal Place of Business 607 N JOHN ST 607 N JOHN ST 607 NJOHN ST. 607 NJOHN ST. ORLANDO, FL 32808 US ORLANDO, FL. 32808 CR2E034 (11/05) 01252008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2614696 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BELZER, ROLAND E. DO NOT WRITE 607 NO. JOHN ST. ORLANDO, FL 32808 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 title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. VΡ TITLE BELZER ROGER NAME STREET ADDRESS 376 BRIMMING LAKE RD CITY-S1-ZIP MINNEOLA, FL 34715 TITLE U000000799817 01/30/08-80084-011 150.00 BELZER, ROBYN NAME STREET ADDRESS **402 DUNOON ST** CITY-ST-ZIP OCOEE, FL 34761 TITLE BELZER, ROLAND E NAME STREET ADDRESS 2318 CROSS LAKE RD DO NOT WRITE CITY-ST-ZIP ORLANDO, FL 32809 IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and eccurate 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:

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

ROBYN C. BELZER

407 295-0267