2007 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # K07769

1. Entity Name
SPECIALIZED PLUMBING, INC.

Principal Place of Business	Mailing Address
4045 CROOKED MILE RD.	4045 CROOKED MILE RD.
MERRITT ISLAND, FL 32952	MERRITT ISLAND, FL 32952

DO NOT WRITE IN THIS SPACE

01052007   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
59-2862763	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GENTILE, MICHAEL R.
4045 CROOKED MILE RD.
MERRITT ISLAND, FL 32952

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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

| **FILE NOW!!! FEE IS $150.00**
 After May 1, 2007 Fee will be $550.00 | 9. Election Campaign Financing
 Trust Fund Contribution. ☐ | **$5.00** May Be
 Added to Fees | |

10.	OFFICERS AND DIRECTORS	
TITLE	P	
NAME	GENTILE, MICHAEL R.	
STREET ADDRESS	4045 CROOKED MILE RD	
CITY-ST-ZIP	MERRITT ISLAND, FL 32952	
TITLE		
NAME		
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05/14/07-80061-017 150.00

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IN THIS SPACE

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 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: _____   4/24/07   321 451 3204

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #