

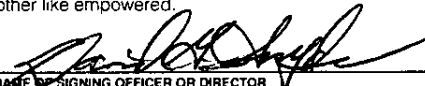


2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 10, 2004 8:00 am
Secretary of State

02-10-2004 90010 018 ***150.00

DOCUMENT # K16180 1. Entity Name SNYDER PLUMBING, INC.					
Principal Place of Business % DOROTHY P. SNYDER 5037 LAKE HOWELL RD WINTER PARK FL 32792 US				Mailing Address % DOROTHY P. SNYDER 5037 LAKE HOWELL RD WINTER PARK FL 32792 US	
2. Principal Place of Business 5043 Lake Howell Rd.		3. Mailing Address 5043 Lake Howell Rd.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Winter Park, FL		City & State Winter Park, FL		4. FEI Number 59-2875161 <input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable	
Zip 32792	Country Seminole	Zip 32792	Country Seminole	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
SNYDER, DOROTHY P. 5037 LAKE HOWELL RD WINTER PARK FL 32792				Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 Dorothy P. Snyder <small>Signature, typed or printed name of registered agent and title if applicable.</small>		 <small>(NOTE: Registered Agent signature required when reinstating)</small>		DATE Feb 2, 04	
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SNYDER, DAVID G. 5037 LAKE HOWELL RD WINTER PARK FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SNYDER, DOROTHY P. 5037 LAKE HOWELL RD WINTER PARK FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: David G. Snyder  Feb 2, 2004 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					