2005 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

Mar 02, 2005 08:00 AM Secretary of State DOCUMENT # L03000047581 1. Entity Name R.J. FISHER PLUMBING, LLC Principal Place of Business Mailing Address 901 SW 35TH AVENUE BOYNTON BEACH FL 33435 901 SW 35TH AVENUE **BOYNTON BEACH FL 33435** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E083 (10/04) City & State City & State 4. FEI Number Applied For 55-0856447 Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name NARDOTTI, ANTHONY M Street Address (P.O. Box Number is Not Acceptable) 3389A W. WOOLBRIGHT ROAD **BOYNTON BEACH FL 33436** City 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 Signature, typed or primed name of registered agent and little II applicable (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2005 MANAGING MEMBERS/MANAGERS 9. 10. ADDITIONS/CHANGES ☐ Delete TITLE Change ☐ Additic FISHER, RAYMOND J NAME STREET ADDRESS 901 SW35TH AVENUE STREET ADDRESS CITY-ST-7IP **BOYNTON BEACH FL 33435** CITY-SE-7/P ☐ Delete Arisen TiTLE ☐ Change HITTE U00000249297 NAME NAME STREET ADDRESS 03/02/05-80065-015 50.00 STHEET ADDRESS CIFY-ST-ZIP Ctit-SI-ZP THE Delete Achillia ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CHY-ST-ZIP TITLE ☐ Delete Change Additio NAME CIREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete THEE ☐ Change Aciditia NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP TITLE Delete TITLE ☐ Change Addition | NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

FILED

I. Fisher 2/25/05 561.734-6813