LIMITED LIABILITY COMPANY **ANNUAL REPORT (AR)**

FILED Mar 19, 2007 8:00 am Secretary of State 03-19-2007 90467 020 ****50.00

DOCUMENT #	L05000092591 .
David Alexan	duc Plumbing Lhc

SIGNATURÉ:



DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 35 Walkacrost Dive 35 Write Cack Dive Suite, Apt. #. etc. CR2E083B (8/05)	
	pplied For ot Applicable
Zip Zip Country Zip 32 32 Country 5. Certificate of Status Desired See Require	
7. Name and Address of Current Registered Agent	
Name Dovid Ahapandon	
DONOT WRITE Street Address (P.O. Box Number is Not Acceptable)	
IN THIS SPACE	
135 Wolher Cre-L Urive	
ON 16 1 4999	300
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.	and accept
SIGNATURE Squerore, Typed or provided furnised respective of approximation of the property of	
FEE IS \$50.00	
Make Check Payebje to Florida Department of State DUE BY MAY 1	
9. MANAGING MEMBERS/MANAGERS	657 T.
mile Hispanet Asont me	39/ 5-1
NAME STREET ADDRESS CITY-ST-ZIP CHANGE DAVID AREA NAME STREET ADDRESS CITY-ST-ZIP CHANGE CITY-ST-ZIP CHANGE CITY-ST-ZIP CHANGE CITY-ST-ZIP	
STREET ADDRESS 135 W41Ko-Creek Dr. Ve STREET ADDRESS	7
	·
TITLE NAME	
STREET ADDRESS STREET ADDRESS	
CITY-ST-ZIP CHY-ST-ZIP	
TILE _ IMPE]	
NAME	
STREET ADDRESS DO NOT WORTH	
CITY-ST-ZIP DO NOT WRITE	<u> </u>
NAME IN THIS SPACE	
STREET ADDRESS STREET ADDRESS	
CITY-ST-ZIP	• .
TIME TIME	ro
NAME	
STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	
Time the state of	
NAME NAME	•
STREET ADDRESS STREET ADDRESS	
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 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 supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii). Florida Statutes.	

DUVIL AMERICA, JOH R MANAGER OR AUTHORIZED REPRESENTATIVE