
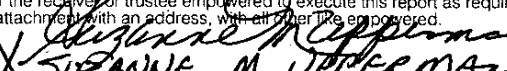


**FILED**  
**Apr 15, 2005 8:00 am**  
**Secretary of State**

<h1 style="margin: 0;">DOCUMENT # L72438</h1>		
<b>1. Entity Name</b> GEORGE'S PLUMBING SERVICES, INC.		
<b>Principal Place of Business</b> 9699 OVERSEAS HWY MARATHON, FL 33050    US		<b>Mailing Address</b> PO BOX 500031 MARATHON, FL 33050    US
<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>
Suite, Apt. #, etc.		Suite, Apt. #, etc.
City & State		City & State
Zip	Country	Zip      Country
<b>6. Name and Address of Current Registered Agent</b>		
FENNER, J P 2840 NW BOCA RATON BLVD STE 107 BOCA RATON, FL 33431		Name
		Street Address
		City
<b>8. The above named entity submits this statement for the purpose of changing its registered office or registering the obligations of registered agent.</b>		
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required)</small>		
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$</b> _____ Ad <b>\$</b> _____
<b>10. OFFICERS AND DIRECTORS</b>		
<b>TITLE</b>	<b>P</b> <input type="checkbox"/> Delete	<b>11.</b>
<b>NAME</b>	UPPERMAN, GEORGE W	<b>TITLE</b>
<b>STREET ADDRESS</b>	419 121 ST GULF	<b>NAME</b>
<b>CITY - ST - ZIP</b>	MARATHON, FL	<b>STREET ADDRESS</b> 211 KE
<b>TITLE</b>	<b>ST</b> <input type="checkbox"/> Delete	<b>TITLE</b>
<b>NAME</b>	UPPERMAN, SUZANNE M	<b>NAME</b>
<b>STREET ADDRESS</b>	419 121 ST GULF	<b>STREET ADDRESS</b> 211 KE
<b>CITY - ST - ZIP</b>	MARATHON, FL	<b>CITY - ST - ZIP</b>
<b>TITLE</b>	<b>V</b> <input checked="" type="checkbox"/> Delete	<b>TITLE</b>
<b>NAME</b>	DUNFORD, REX M	<b>NAME</b>
<b>STREET ADDRESS</b>	1093 74 ST - OCEAN	<b>STREET ADDRESS</b>
<b>CITY - ST - ZIP</b>	MARATHON, FL	<b>CITY - ST - ZIP</b>
<b>TITLE</b>	<input type="checkbox"/> Delete	<b>TITLE</b>
<b>NAME</b>		<b>NAME</b>
<b>STREET ADDRESS</b>		<b>STREET ADDRESS</b>
<b>CITY - ST - ZIP</b>		<b>CITY - ST - ZIP</b>
<b>TITLE</b>	<input type="checkbox"/> Delete	<b>TITLE</b>
<b>NAME</b>		<b>NAME</b>
<b>STREET ADDRESS</b>		<b>STREET ADDRESS</b>
<b>CITY - ST - ZIP</b>		<b>CITY - ST - ZIP</b>
<b>TITLE</b>	<input type="checkbox"/> Delete	<b>TITLE</b>
<b>NAME</b>		<b>NAME</b>
<b>STREET ADDRESS</b>		<b>STREET ADDRESS</b>
<b>CITY - ST - ZIP</b>		<b>CITY - ST - ZIP</b>
<b>12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in 6, indicated on this report or supplemental report is true and accurate and that my signature shall have the effect of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 6, changed, or on an attachment with an address, with all other title empowered.</b>		
<b>SIGNATURE:</b>  <b>SUZANNE M. UPPERMAN, VP</b>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		