2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

Jul 16, 2004 8:00 am **Secretary of State** DOCUMENT # M02691 07-16-2004 90001 028 ***150.00 F & J PLUMBING, INC. Principal Place of Business Mailing Address % FREDRICK T. BROWN % FREDRICK T. BROWN 44048373 6405 CONGRESS AVENUE #130 6405 CONGRESS AVENUE #130 BOCA RATON, FL 33487 BOCA RATON, FL 33487 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07012004 CR2E034 (10/03) Chg-P 4. FEI Number Applied For City & State City & State 59-2434542 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BROWN, FREDRICK T. 3001 W. ROLLING HILLS CIRC. **DAVIE, FL 33328** City 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** (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 8, 2004 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. Prosident Addition TITLE ☐ Delete TITLE Brown, Fredrick T. 12415 SW 34 Place BROWN, FREDRICK T. NAME NAME 3001 W. ROLLING HILLS CIR, #708 STREET ADDRESS STREET ADDRESS Davie, FL 33330 CITY-ST-7IP CITY-ST-7R DAVIE, FL VICE President DIOSIO Daniel R 7832-Wisunflower Dr. ☐ Change Addition Delete TITLE TITLE SARIOL, CHERI NAME NAME 7354 TEXAS TRAIL STREET ADDRESS STREET ADDRESS CITY-ST-7IP margate, FL 33063 CITY-ST-ZIP **BOCA RATON, FL** ☐ Addition ☐ Change TITLE Delete DDE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ■ Addition TITLE ☐ Change TITI F Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-78P Change ☐ Addition TITLE TITLE Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition TITLE ☐ Delete TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED