FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Feb 26, 2002 8:00 am Secretary of State DOCUMENT # P00000069426 1. Entity Name ROYAL PLUMBING CONTRACTORS, INC. 02-26-2002 90075 015 ***150.00 Principal Place of Business Mailing Address 11719 WILD CAT LANE 11719 WILD CAT LANE **NEW PORT RICHEY FL 34654 NEW PORT RICHEY FL 34654** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-3660238 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GOODEN, DANIEL C Street Address (P.O. Box Number is Not Acceptable) 11719 WILD CAT LANE **NEW PORT RICHEY FL 34654** City Zip Code FL 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE CR2E034 (9/01) Delete TITLE tesident NAME GOODEN: DANIEL C NAME STREET ADORESS 11719 WILD CAT LANE STREET ADDRESS wild CAT LN. CITY-ST-7IP NEW PORT RICHEY FL 34654 CITY-ST-ZIP TITLE Change ☐ Addition ☐ Delete TITLE ice President NAME GOODEN, BRENDA NAME brenda Gooden STREET ADDRESS 11719 WILD CAT LANE STREET ADDRESS ling wild CATLN. CITY-ST-ZIP **NEW PORT RICHEY FL 34654** CITY-ST-ZIP New Port Richeu ☐ Delete TITLE ecretary Change ☐ Addition Gooden FERNANDEZ, EDWARD NAME Daniel T. STREET ADDRESS 11719 WILD CAT LANE STREET ADDRESS linia wild cat La. **NEW PORT RICHEY FL 34654** CITY-ST-ZIP CITY-ST-ZIP New Port Richer Director Edward Fernandez 11719 Wild Cathu. TITLE ☐ Delete TITLE Change ☐ Addition GOODEN, DANIEL T NAME NAME STREET ADDRESS 11719 WILD CAT LANE STREET ADDRESS CITY-ST-ZIP **NEW PORT RICHEY FL 34654** CITY-ST-ZIP New Host Richeu Director TITLE TITLE ☐ Delete marthew Stein linia will CAT lane NAME MARAE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 13. 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 11 or Block 12 if

changed, or on an attachment with an address, with all other like SIGNATURE: