2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P00000069426

Entity Name: ROYAL PLUMBING CONTRACTORS, INC.

FILED Dec 12, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8611 BOLTON AVE. HUDSON, FL 34667

Current Mailing Address: New Mailing Address:

8611 BOLTON AVE. HUDSON, FL 34667

FEI Number: 59-3660238 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GOODEN, DANIEL C

8611 BOLTON AVE.

HUDSON, FL 34667 US

GOODEN, BRENDA L

8611 BOLTON AVE

HUDSON, FL 34667 US

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: BRENDA L. GOODEN 12/12/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Name: Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: GOODEN, DANIEL C Name: GOODEN, BRENDA L

Address: 11719 WILD CAT LANE Address: 8611 BOLTON AVE
City-St-Zip: NEW PORT RICHEY, FL 34654 City-St-Zip: HUDSON, FL 34667

Title: VP () Delete Title: D (X) Change () Addition Name: GOODEN, BRENDA Name: GOODEN, DANIEL T

 Name:
 GOODEN, BRENDA
 Name:
 GOODEN, DANIEL T

 Address:
 11719 WILD CAT LANE
 Address:
 8611 BOLTON AVE

 City-St-Zip:
 NEW PORT RICHEY, FL 34654
 City-St-Zip:
 HUDSON, FL 34667

Title: D () Delete Title: D (X) Change () Addition Name: GOODEN, DANIEL T Name: LORD, LEONARD

Address: GOODEN, DANIEL I Name: LORD, LEONARD

Address: 9525 SUNBEAM DRIVE

City-St-Zip: NEW PORT RICHEY, FL 34654

City-St-Zip: NEW PORT RICHEY, FL 34654

Title: S (X) Delete Title: () Change () Addition

GOODEN, DANIEL T Name:
11719 WILD CAT LANE Address:
NEW PORT RICHEY, FL 34654 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRENDA L. GOODEN P 12/12/2007