2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005
Secretary of State

DOCUMENT# P01000004557

Entity Name: ADMAR PLUMBING, INC.

Current Principal Place of Business:

4275 WALTON BRIDGE ROAD
PONCE DE LEON, FL 32455

New Principal Place of Business:

Current Mailing Address:

PO BOX 766
FREEPORT, FL 32439

New Mailing Address:

FEI Number: 59-3695239 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SILER, SHERYL
4277 WALTON BRIDGE ROAD
PONCE DE LEON, FL 32455 US

Name and Address of New Registered Agent:

MILLER, TINA
4277 WALTON BRIDGE ROAD
PONCE DE LEON, FL 32455 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: TINA MILLER 04/28/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: SILER, ADAM
Address: 4275 WALTON BRIDGE ROAD
City-St-Zip: PONCE DE LEON, FL 32455

Title: D ( ) Delete
Name: SILER, ADAM D
Address: 4277 WALTON BRIDGE ROAD
City-St-Zip: PONCE DE LEON, FL 32455

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ADAM D. SILER D 04/28/2005
Electronic Signature of Signing Officer or Director Date