

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000079336

FILED
Apr 22, 2004
Secretary of State

Entity Name: A-1 REACTION PLUMBING, INC.

Current Principal Place of Business:

1021 SW 134 AVENUE
DAVIE, FL 33325

New Principal Place of Business:

Current Mailing Address:

1021 SW 134 AVENUE
DAVIE, FL 33325

New Mailing Address:

FEI Number: 65-1128921 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CIOFFI, JOHN L
1021 SW 134 AVENUE
DAVIE, FL 33325

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CIOFFI, JOHN L
Address: 1021 SW 134 AVENUE
City-St-Zip: DAVIE, FL 33325

Title: D () Delete
Name: LAPOINTE, JAMES
Address: 2922 PRAIRE VIEW DRIVE
City-St-Zip: LOXAHATCHEE, FL 33470

Title: T () Delete
Name: CIOFFI, JOHN
Address: 1021 SW 134TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33325

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: JOHN L. CIOFFI

PD

04/22/2004

Electronic Signature of Signing Officer or Director

Date