


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 31, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # P01000090154  
 1. Entity Name  
 4-J'S PLUMBING, INC.



Principal Place of Business      Mailing Address  
 234 SW 37TH ST                      234 SW 37TH ST  
 CAPE CORAL, FL 33914              CAPE CORAL, FL 33914

**DO NOT WRITE IN THIS SPACE**



03092004    No Chg-P    CR2E034 (10/03)

4. FEI Number      Applied For  
 65-1136814      Not Applicable

5. Certificate of Status Desired        \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 SMITH, JAMES P  
 234 SW 37TH ST  
 CAPE CORAL, FL 33914

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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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature must be printed name of registered agent and the fee payable      DATE: Registered Agent's signature required under the statute

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.        \$5.00 May Be Added to Fees

000000099477  
 03/31/04-80007-011 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SMITH, JAMES P
STREET ADDRESS	234 SW 37TH ST
CITY ST ZIP	CAPE CORAL, FL 33914
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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 Book 10 or Book 11 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE: James P Smith    JAMES P SMITH    3-19-04    239-549-4515  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Date of Filing