2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000117666

Entity Name: AZTEC PLUMBING, INC.

City-St-Zip:

CAPE CORAL, FL 33914

FILED Jan 20, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4529 SE 16TH PLACE CAPE CORAL, FL 33904 **Current Mailing Address: New Mailing Address:** 4529 SE 16TH PLACE CAPE CORAL, FL 33904 FEI Number: 22-3850820 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: TAUB, STEPHEN P 5235 INDIAN COURT SANIBEL, FL 33957 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition TAUB, STEPHEN P Name: Name: 5325 INDIAN COURT Address: Address: City-St-Zip: SANIBEL, FL 33957 City-St-Zip: Title: Title: () Change () Addition () Delete Name: TAUB. LAURIE Name: 5325 INDIAN COURT Address: Address: SANIBEL, FL 33957 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition TEDESCO, CHRISTOPHER Name: Name: 2825 SW 42ND LANE Address: Address:

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.

City-St-Zip:

SIGNATURE: LAURIE TAUB OFFI 01/20/2009