2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004
Secretary of State

DOCUMENT# P02000018062

Entity Name: RUWE PLUMBING, INC.

Current Principal Place of Business:

3554 NW 91ST LANE
SUNRISE, FL 33351

New Principal Place of Business:

2420 WOODSIDE DRIVE
FT. LAUDERDALE, FL 33312

Current Mailing Address:

3554 NW 91ST LANE
SUNRISE, FL 33351

New Mailing Address:

2420 WOODSIDE DRIVE
FT. LAUDERDALE, FL 33312

FEI Number: 20-0074224 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RUWE, VALERIE
3554 NW 91ST LANE
SUNRISE, FL 33351 US

Name and Address of New Registered Agent:

RUWE, VALERIE
2420 WOODSIDE DRIVE
FT. LAUDERDALE, FL 33312 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: VALERIE RUWE 04/28/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: RUWE, VALERIE
Address: 3554 SW 91 LANE
City-St-Zip: SUNISE, FL 33351

Title: VP ( ) Delete
Name: ROWE, JOSEPH
Address: 813 COLISEUM AVE
City-St-Zip: LIVE OAK, FL 32064

Title: T ( ) Delete
Name: RUWE, JOSEPH
Address: 3554 NW 91 LANE
City-St-Zip: SUNRISE, FL 33351

Title: S ( ) Delete
Name: ROWE, LINDA
Address: 831 COLISEUM AVE
City-St-Zip: LIVE OAK, FL 32064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition
Name: RUWE, JOSEPH
Address: 813 COLISEUM AVE
City-St-Zip: LIVE OAK, FL 32064

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

Title: S (X) Change ( ) Addition
Name: RUWE, LINDA
Address: 831 COLISEUM AVE
City-St-Zip: LIVE OAK, FL 32064

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: VALERIE RUWE P 04/28/2004
Electronic Signature of Signing Officer or Director Date