



**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 11, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000028234			
1. Entity Name JOE'S PLUMBING & ROOTER, INC.			
Principal Place of Business 7065 TURNER RD ROCKLEDGE, FL 32955	Mailing Address 7065 TURNER RD ROCKLEDGE, FL 32955		
DO NOT WRITE IN THIS SPACE			
		04022006 No Chg-P CRZE034 (11/05)	
		4. FEI Number 43-1957861	Applied For <input type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fees Required
6. Name and Address of Current Registered Agent CHEEK, TAMARA L 1601 AIRPORT BLVD STE 2 MELBOURNE, FL 32901		DO NOT WRITE IN THIS SPACE	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		U000000502556 04/25/06-80109-003 150.00 DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P DEUTSCH, JOSEPH K 7065 TURNER RD ROCKLEDGE, FL 32955		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u>Joseph K Deutsch</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED OFFICER OR DIRECTOR</small>		4-8-06 321-259-0300 <small>Date Daytime Phone #</small>	