

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000063577

FILED
Jul 11, 2004
Secretary of State

Entity Name: ACUFIT PLUMBING SUPPLY, INC.

Current Principal Place of Business:

7070 NW 177 STREET #201
HIALEAH, FL 33015

New Principal Place of Business:

7070 NW 177 STREET
#201
HIALEAH, FL 33015

Current Mailing Address:

7070 NW 177 STREET #201
HIALEAH, FL 33015

New Mailing Address:

7070 NW 177 STREET
#201
HIALEAH, FL 33015

FEI Number: 04-3704885

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KWOCK, WO Q
7070 NW 177 STREET #201
HIALEAH, FL 33015

Name and Address of New Registered Agent:

KWOCK, WO Q
7070 NW 177 STREET
#201
HIALEAH, FL 33015

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: WO KWOCK

07/11/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KWOCK, WO Q
Address: 7070 NW 177 STREET #201
City-St-Zip: HIALEAH, FL 33015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: WO KWOCK

P

07/11/2004

Electronic Signature of Signing Officer or Director

Date