## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jul 06, 2005 08:00 AM Secretary of State

DOCUMENT # P02000089883  1. Entity Name ALL PEOPLE PLUMBING SUPPLY CO.				Secretary of State				
Principal Place 5/30 NW 7 MIAMI, FL 3	e of Business AVENUE 31,27	Mailing Address 5/30 NW 7 AVENUE MIAMI, FL 33127			BITS INSTERNATION STATES	5 <b>8 8</b> 12 2 3 16 16 16 16 17 18 18 18 18 18 18 18 18 18 18 18 18 18	: N(S) (3)22       Wa;	
DO NOT WRITE IN THIS SPA			CE	06302005 4. FEI Number 14-1843		CR2E034	(10/03) Applied For Not Applicable	
	6. Name and Address of Current R	egistered Agent		5. Certificate o	f Status Desired	□ \$8 Fee	Required	
BIEN-AIME, JAMES 5/30 NW 7 AVENUE MIAMI, FL 3312 7					NOT W HIS SP			
8. The above the obligat	named entity submits this statement for tuons of registered agent.		red office or register	·	, in the State of Flor	rida. I am fam	illar with, and accept	
FILE NOW!!! FEE IS \$550.00 9. Election Can Due by September 7, 2005 Trust Fund C			~ _ ++.	00 May Be		·		
10.	OFFICERS AND D.	RECTORS		·				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BIENAIME, JAMES 1 NW 89 STREET EL PORTAL, FL 33150			e de la companya de l				
TITLE NAME STREET ADDRESS CHY-ST-ZIP					000000 	370354 80002-0	21 "San na "T	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO I	VOT W			
NAME STREET ADDRESS CITY-ST-ZIP	re i address			IN THIS SPACE				
THEE NAME STREET ADDRESS GIFY-ST-ZIP								

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

STREET ADDRESS CITY-ST-ZIP

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTO

6/30/05 Date (304) 754-4826

Daytima Phone #