# '2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

### Apr 26, 2006 8:00 am Secretary of State DOCUMENT # P02000108932 04-26-2006 90196 047 \*\*\*150.00 1. Entity Name AMS PLUMBING, INC. Principal Place of Business Mailing Address POST OFFICE BOX 220245 POST OFFICE BOX 220245 HOLLYWOOD, FL 33022 HOLLYWOOD, FL 33022 2. Principal Place of Business 3. Mailing Address Suita, Apt. #, etc. Suite, Apt. #, etc. 03062006 CR2E034 (11/05) Chg-P City & State City & State 4. FEI Number Applied For 30-0148229 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GOTTLIEB, BRUCE M 125 NORTH 46 AVENUE Street Address (P.O. Box Number is Not Acceptable) HOLLYWOOD, FL 33021 City Zip Code 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. Signature, typed or printed name of registered agent and title it applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11 D TITLE ☐ Delete TITLE □ Change ☐ Addition SHOMSKY, JOSEPH NAME NAME STREET ADDRESS POST OFFICE BOX 220245 STREET ADDRESS HOLLYWOOD, FL 33022 CITY-ST-7/P CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CiTY-ST-ZIP TITLE ☐ Delete TITI F ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP TITLE ☐ Delete TITLE ☐ Addition Change Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 geport as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if charged, or on an attachment with an address with all giner like empowered.

OFFICER OR DIRECTOR

**FILED** 

4. 18.06 954-701-44

# ATTACHMENT

# 17 H0063428 Cottlieb #102000108932

A Professional Association www.gottlieblaw.com

Bruce M. Gottlieb

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Tallahassee, FL 32302-1500

April 24, 2006

RE: 2006 Annual Report

OUR FILE NUMBER: 4622

## Gentlemen:

Enclosed, for filing with the Florida Department of State, is the 2006 Annual Report for AMS PLUMBING, INC., along with the required filing fee of \$150.00. Please proceed to file as required.

Very truly yours,

GOTTLIEB & GOTTLIEB, ATTORNEYS AT LAW, P.A.

Bruce M. Gottlieb

BMG/aw **Enclosures**