

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000099434

Entity Name: FLAT RATE PLUMBING INC.

FILED  
Jan 24, 2009  
Secretary of State

**Current Principal Place of Business:**

7519 N. LEEWYNN DR.  
SARASOTA, FL 34240 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 51195  
SARASOTA, FL 34232 US

**New Mailing Address:**

P.O. BOX 51195  
SARASOTA, FL 34232 US

FEI Number: 14-1894796

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PEKAREK, MARTIN  
7519 N. LEEWYNN DR.  
SARASOTA, FL 34240 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: PEKAREK, MARTIN  
Address: 7519 N. LEEWYNN DR.  
City-St-Zip: SARASOTA, FL 34240

Title: S ( ) Delete  
Name: PEKAREK, D. ANN  
Address: 7519 N. LEEWYNN DR.  
City-St-Zip: SARASOTA, FL 34240 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: D. ANN PEKAREK

S

01/24/2009

Electronic Signature of Signing Officer or Director

Date