

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000101948

Entity Name: ALLIANCE PLUMBING, INC.

FILED
Apr 14, 2005
Secretary of State

Current Principal Place of Business:

325 BELLE POINT DRIVE
ST. PETERSBURG BEACH, FL 33706

New Principal Place of Business:

352 BELLE POINT DRIVE
ST. PETE BEACH, FL 33706 US

Current Mailing Address:

325 BELLE POINT DRIVE
ST. PETERSBURG BEACH, FL 33706

New Mailing Address:

352 BELLE POINT DRIVE
ST. PETE BEACH, FL 33706 US

FEI Number: 20-0219569

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FEDDON, DAVID W
352 BELLE POINT DRIVE
ST. PETERSBURG BEACH, FL 33706 US

Name and Address of New Registered Agent:

FEDDON, DAVID W
352 BELLE POINT DRIVE
ST. PETE BEACH, FL 33706 US

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:

04/14/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FEDDON, DAVID W
Address: 352 BELLE POINT DRIVE
City-St-Zip: ST. PETERSBURG BEACH, FL 33706

Title: VP () Delete
Name: HERNANDEZ, JOSE C
Address: 2708 W. IVY ST.
City-St-Zip: TAMPA, FL 33607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: FEDDON, DAVID W
Address: 352 BELLE POINT DRIVE
City-St-Zip: ST. PETE BEACH, FL 33706 US

Title: VP (X) Change () Addition
Name: HERNANDEZ, JOSE C
Address: 2708 W. IVY ST.
City-St-Zip: TAMPA, FL 33607 US

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: DAVID W. FEDDON

PRES

04/14/2005

Electronic Signature of Signing Officer or Director

Date