2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 26, 2004 8:00 am Secretary of State

DOCUMENT # P03000111329 1. Entity Name A AFFORDABLE PLUMBING SERVICE, INC						04-26-2004	4 90525 034 ***1	150.00
Principal Place of Business 550 BREAKWATER STREET, S.E. PALM BAY, FL 32909 US Address 550 BREAKWATER STREET PALM BAY, FL 32909				E. 252				
Principal Place of Business 3. Mailing Address					188 JULO 89111 8811 891 8			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			02042004	Chg-P	CR2E034 (10/03)	·
City & State		City & State		4. FEI Number	7360	No	oplied For of Applicable	
Zip .	Country	Zip	Coun	itry	5. Certificate of		S8.75 Add Fee Require	ditional
	6. Name and Address of Current	Registered Agent		Name :	7, Name and A	ddress of New Re	egistered Agent	
LITTLE; WILLIAM R 550 BREAKWATER STREET, S.E. PALM BAY, FL 32909			٠.		s (P.O. Box Number i	s Not Acceptable	,-	
Ď				City			FL Zip Cod	e ,
	enamed entity submits this statement for tions of registered agent.	or the purpose of changi	ing Its register	ed office or regist	tered agent, or both,	in the State of Flo	rida. I am familiar with,	and accept
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable.	(NOTE: Registere	d Agent signature requir	ired when reinstating)		DATE	
FIL	Signature, lyoed or printed name of registered agent E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.	9. Election C	(NOTE: Registered ampaign Finar d Contribution.	ncing \$	5.00 May Be dded to Fees	*:	DATE	
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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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR