## 2008 FOR PROFIT CORPORATION

## 008 08:00 AI ate

ANNUAL REPORT			Apr 02, 2000 00:0		
DOCUMENT # P03000		Secretary of St			
1. Entity Name     AS QUICK AS I CAN PLUMBING & DRAIN CLEANING INC.					
Principal Place of Business 6509 LOCH LOMMOND DRIVE KEYSTONE HEIGHTS, FL 32656	Mailing Address P.O. BOX 249 KEYSTONE HEIGHTS, FL 326	556			
•			04012008	No Chg-P CR2E034 (11/05)	
DO NOT WRI	TE IN THIS SPA	CE	4. FEI Numb 20-048	9885 Not Applicable of Status Desired \$8.75 Additional	
6. Name and Address of C	urrent Pagistared Agent			Fee Required	
CLARK, BRIAN 3330 NW 28TH PL GAINESVILLE, FL 32605			· · . · .	NOT WRITE THIS SPACE	
The above named entity submits this stater the obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registere.		ered office or register ered Agent signature required		th, in the State of Florida. I am familiar with, and accept  DATE	
FILE NOW!!! FEE IS \$150.00  After May 1, 2008 Fee will be \$550.00  9. Election Campaign Finan Trust Fund Contribution.		~ _ ~~	.00 May Be ed to Fees	U00000877373 04/14/08-80011-025 150.00	
	AND DIRECTORS		**		
NAME CLARK, BRIAN STREET ADDRESS 3330 NW 28TH PL CITY-SI-ZIP GAINESVILLE, FL 32605			***	Promise of the second s	
TIILE NAME STREET ADDRESS CITY-S1-ZIP		р (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		And the second s	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		The state of the s	in:	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			A Company		
IIILE NAME	•		to make y	Jan 1	

12. Thereby certify that the information supplied with this filling 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 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

352-473-7783