


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2007 08:00 AM
Secretary of State

DOCUMENT # P03000137596
 1. Entity Name
PEPEMASTERS PLUMBING SERVICES, INC.



| | |
|---|---|
| Principal Place of Business 755 NW131 STREET NORTH MIAMI, FL 33168 | Mailing Address 755 NW131 STREET NORTH MIAMI, FL 33168 |
|---|---|



02172007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

| | |
|--|---------------------------------------|
| 4. FEI Number 20-0416997 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent
**GARCIA, CESAR
 755 NW 131 STREET
 NORTH MIAMI, FL 33168**

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P GARCIA, CESAR A 755 NW 131 STREET NORTH MIAMI, FL 33168 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP GARCIA, BRUCE F 755 NW 131 STREET NORTH MIAMI, FL 33168 |
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 03/06/07-80014-003 158.75

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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 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: Cesar Garcia **CESAR GARCIA** 02/18/07 ⁽³⁰⁵⁾ 975-3531
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #