

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90383 029 ***158.75

DOCUMENT # P04000004904

1. Entity Name:
DE RUSS PLUMBING, INC.



Principal Place of Business

1202 NE PINE ISLAND RD., UNIT 2N
CAPE CORAL, FL 33909
1009 NE 8TH ST., #13
CAPE CORAL FL 33909

Mailing Address

1236 SW 4TH CT.
CAPE CORAL, FL 33991
1009 NE 8TH ST., #13
CAPE CORAL FL 33909



04162007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
73-1692217

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RUSSELL, DERRICK
1236 SW 4TH COURT
CAPE CORAL, FL 33991

**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 DERRICK RUSSELL
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4-18-07
DATE

**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 PD
NAME ~~RUSSELL, CAROLYN~~ DERRICK RUSSELL
STREET ADDRESS 1236 SW 4TH CT.
CITY-ST-ZIP CAPE CORAL, FL 33991

TITLE VP
NAME ~~RUSSELL, DERRICK~~ CAROLYN RUSSELL
STREET ADDRESS 1236 SW 4TH CT.
CITY-ST-ZIP CAPE CORAL, FL 33991

TITLE
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CITY-ST-ZIP

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IN THIS SPACE**

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: DERRICK RUSSELL
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-18-07 239-242-9706
Date Daytime Phone #