

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000015635

FILED
Aug 03, 2005
Secretary of State

Entity Name: MASTER PLUMBING SYSTEM OF SW FLORIDA INC

Current Principal Place of Business:

885 EVERGLADES BLVD SOUTH
NAPLES, FL 34117

New Principal Place of Business:

Current Mailing Address:

885 EVERGLADES BLVD SOUTH
NAPLES, FL 34117

New Mailing Address:

FEI Number: 20-0617806

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARTA, ROMELIO A
885 EVERGLADES BLVD. SOUTH
NAPLES, FL 34117 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CARTA, ROMELIO A
Address: 885 EVERGLADES BLVD. SOUTH
City-St-Zip: NAPLES, FL 34117

Title: V () Delete
Name: GONSALES, ROY
Address: 2780 8TH AVENUE NE
City-St-Zip: NAPLES, FL 34120

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ROMELIO A. CARTA

PRES

08/03/2005

Electronic Signature of Signing Officer or Director

Date