## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000097957

Entity Name: ALL PRO PLUMBING SYSTEMS INC.

FILED May 18, 2008 Secretary of State

| Current Principal Place of Business:             |   |   | New Principal Place o                         | New Principal Place of Business:             |  |
|--|---|---|---|--|--|
| 5771 SEA<br>NAPLES, I                            | GRASS LANE<br>FL 34116 l                            |   |   |  |  |
| Current Mailing Address:                         |   |   | New Mailing Address                           | New Mailing Address:                         |  |
| P.O. BOX 1256<br>BONITA SPRINGS, FL 341331256 US |   | 341331256 US  | 5771 SEA GRASS LANE<br>NAPLES, FL 34116 US    |  |  |
| FEI Number                                       | : 20-3144577  | FEI Number Applied For ( )  | FEI Number Not Applicable ( )                 | Certificate of Status Desired ( )            |  |
| Name and Address of Current Registered Agent:    |   |   | Name and Address of                           | Name and Address of New Registered Agent:    |  |
|  | OBDULIO D<br>GRASS LANE<br>FL 34116 \               |   |   |  |  |
|  | e named entity<br>e of Florida.                     | submits this statement for the                                    | e purpose of changing its registered          | office or registered agent, or both,         |  |
| SIGNATU  | RE:   |   |   |  |  |
|  | Electro   | nic Signature of Registered A                                     | gent  | Date   |  |
|  |   | 3(2)(b), F.S., the corporation did g Trust Fund Contribution ( ). | not receive the prior notice.                 |  |  |
| OFFICERS AND DIRECTORS:                          |   |   | ADDITIONS/CHANGE                              | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:      | P (<br>GARCIA, OBDI<br>5771 SEA GRA<br>NAPLES, FL 3 | ASS LANE  | Title: (<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: OBDULIO D. GRACIA PRES 05/18/2008