2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Apr 22, 2009
Secretary of State

DOCUMENT# P05000097957

Entity Name: ALL PRO PLUMBING SYSTEMS INC.

Current Principal Place of Business:	**New Principal Place of Business:**
11626 CHAPMAN AVE. BONITA SPRINGS, FL 34135 US	

Current Mailing Address:	**New Mailing Address:**
11626 CHAPMAN AVE. BONITA SPRINGS, FL 34135 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 New Registered Agent:**
GARCIA, OBDULIO D 11626 CHAPMAN AVE BONITA SPRINGS, FL 34135 US	

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

OFFICERS AND DIRECTORS:

			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	GARCIA, OBDULIO D	
Address:	11626 CHAPMAN AVE.	
City-St-Zip:	BONITA SPRINGS, FL 34135 US	

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

Title:	VP	( ) Delete
Name:	RODRIGUEZ, JAVIER	
Address:	1298 SE 9TH. CT.	
City-St-Zip:	HIALEAH, FL 33025	

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

Title:	SEC.	(X) Delete
Name:	HUERTA, ANTONIO A	
Address:	2236 48TH. ST. SW	
City-St-Zip:	NAPLES, FL 34116	

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

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 GARCIA　　　　　　　　　　　　　PRES　　　　　　　04/22/2009

　　　　　　Electronic Signature of Signing Officer or Director　　　　　　　　　　　　　　　Date