
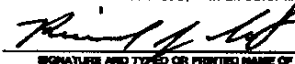


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

2 Mar 10, 2006 8:00 am
Secretary of State

02-24-2006 90001 017 ***158.75

DOCUMENT # P05000156733					
1. Entity Name P & M MECHANICAL, INC.					
Principal Place of Business 340 STERLING DRIVE, SE WINTER HAVEN, FL 33884 US			Mailing Address P.O. BOX 2022 EAGLE LAKE, FL 33839 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 20-3873770	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent CONTI, JANET 340 STERLING DRIVE, SE WINTER HAVEN, FL 33884				7. Name and Address of New Registered Agent	
				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renouncing)</small>					
DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$350.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS					
TITLE	NAME	STREET ADDRESS	CITY- ST- ZIP	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11.	
	P. CONTI, JOSEPH A	340 STERLING DRIVE, SE	WINTER HAVEN, FL 33884	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
	S/T CONTI, RICHARD J	737 CARROLL AVENUE, SW	WINTER HAVEN, FL 33880	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
				<input type="checkbox"/> Change <input type="checkbox"/> Addition	
				<input type="checkbox"/> Change <input type="checkbox"/> Addition	
				<input type="checkbox"/> Change <input type="checkbox"/> Addition	
				<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: 				2/22/06 863-291-3020 <small>Daytime Phone #</small>	



ATTACHMENT

#66004537

FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 28, 2006

P & M MECHANICAL, INC.
P.O. BOX 2022
EAGLE LAKE, FL 33839 US

Subject: P & M MECHANICAL, INC.

Reference Number: P05000156733

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$158.75; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/al

ANNUAL REPORTS SECTION