

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000029000

FILED  
Mar 10, 2009  
Secretary of State

Entity Name: CB PLUMBING SPECIALISTS, INC.

## Current Principal Place of Business:

13921 LANGLEY PLACE  
DAVIE, FL 33325 US

## New Principal Place of Business:

750 SW 133RD TERRACE  
APT. 112C  
PEMBROKE PINES, FL 33027 US

## Current Mailing Address:

13921 LANGLEY PLACE  
DAVIE, FL 33325 US

## New Mailing Address:

750 SW 133RD TERRACE  
APT. 112C  
PEMBROKE PINES, FL 33027 US

FEI Number: 20-4595789      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BRANKER, MAUREEN  
13921 LANGLEY PLACE  
DAVIE, FL 33325 US

## Name and Address of New Registered Agent:

BRANKER, MAUREEN  
750 SW 133RD TERRACE  
APT. 112C  
PEMBROKE PINES, FL 33027 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: MAUREEN BRANKER

03/10/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: BRANKER, MAUREEN  
Address: 13921 LANGLEY PLACE  
City-St-Zip: DAVIE, FL 33325 US

Title: VP ( ) Delete  
Name: BRANKER, MARK  
Address: 2062 PASA VERDE LANE  
City-St-Zip: WESTON, FL 33327

Title: D ( ) Delete  
Name: BRANKER, CLYNTON  
Address: 13921 LANGLEY PLACE  
City-St-Zip: DAVIE, FL 33325

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: BRANKER, MAUREEN  
Address: 750 SW 133RD TERRACE  
City-St-Zip: PEMBROKE PINES, FL 33027 US

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

Title: D (X) Change ( ) Addition  
Name: BRANKER, CLYNTON  
Address: 907 NW 100TH AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33024

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: MAUREEN BRANKER

P

03/10/2009

Electronic Signature of Signing Officer or Director

Date