

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000057654

FILED  
Apr 16, 2009  
Secretary of State

Entity Name: BIG TIME PLUMBING CORP.

## Current Principal Place of Business:

5889 RODMAN STREET  
HOLLYWOOD, FL 33023

## New Principal Place of Business:

## Current Mailing Address:

5889 RODMAN ST.  
HOLLYWOOD, FL 33023

## New Mailing Address:

5889 RODMAN STREET  
HOLLYWOOD, FL 33023

FEI Number: 20-4765805

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

WISLER, DALE PRES.  
221 SW 11TH AVE.  
HALLANDALE, FL 33009 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: PTD ( ) Delete  
Name: WISLER, DALE  
Address: 221 SW 11TH AVE.  
City-St-Zip: HALLANDALE, FL 33009

Title: VSD ( ) Delete  
Name: MEARS, LANCE C V. PRES  
Address: 221 SW 11TH AVE.  
City-St-Zip: HALLANDALE, FL 33009

## 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 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: DALE WISLER

PTD

04/16/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date