2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000065281

Entity Name: AFFILIATED PLUMBING, INC.

FILED Jun 04, 2007 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
| | |

5381 NW 33 AVE #101C FT LAUDERDALE, FL 33309

Current Mailing Address: New Mailing Address:

5381 NW 33 AVE #101C FT LAUDERDALE, FL 33309

FEI Number: 56-2581103 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:

BONI, LOU

4455 N W 9TH AVENUE

OAKLAND PARK, FL 33309 US

BONI, LOU

5381 N.W. 33RD AVENUE

SUITE 101-C

OAKLAND PARK, FL 33309 US SUITE 101-C FT. LAUDERDALE, FL 33309 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: 06/04/2007

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name: BONI, LOU Name: BONI, LOU

 Address:
 4455 N W 9TH AVENUE
 Address:
 5381 N.W. 33RD AVENUE

 City-St-Zip:
 OAKLAND PARK, FL 33309
 City-St-Zip:
 FT. LAUDERDALE, FL 33309

Title: VP (X) Delete Title: () Change () Addition

 Name:
 FERNANDEZ, GEORGE
 Name:

 Address:
 4455 N W 9TH AVENUE
 Address:

 City-St-Zip:
 OAKLAND PARK, FL 33309
 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: LOU BONI P 06/04/2007