

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000091997

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

**Entity Name:** ALBERT'S A + AFFORDABLE QUALITY PUMPING, INC.

**Current Principal Place of Business:**

24180 SW 122 AVE  
HOMESTEAD, FL 33032

**New Principal Place of Business:**

30620 SW 199 AVE  
HOMESTEAD, FL 33030

**Current Mailing Address:**

PO BOX 900190  
HOMESTEAD, FL 33090

**New Mailing Address:**

**FEI Number:** 26-0722475

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

VIRGEN M NAITE  
24180 SW 122 AVE  
HOMESTEAD, FL 33032 US

**Name and Address of New Registered Agent:**

VIRGEN M NAITE  
30620 SW 199 AVE  
HOMESTEAD, FL 33030 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: VIRGEN M NAITE

04/30/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: NAITE, VIRGEN M  
Address: PO BOX 900190  
City-St-Zip: HOMESTEAD, FL 33090

Title: VP  
Name: NAITE, CARLOS A  
Address: PO BOX 900190  
City-St-Zip: HOMESTEAD, FL 33090

I hereby 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 all other like empowered.

SIGNATURE: VIRGEN M NAITE

P

04/30/2011

Electronic Signature of Signing Officer or Director

Date