

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000030475

**FILED**  
**Mar 21, 2012**  
**Secretary of State**

**Entity Name:** PLUMBING AND MECHANICAL SYSTEMS OF SOUTH FLORIDA, INC.

**Current Principal Place of Business:**

4350 OAKS ROAD  
#514  
DAVIE, FL 33314

**New Principal Place of Business:**

4350 OAKES ROAD  
#514  
DAVIE, FL 33314

**Current Mailing Address:**

4350 OAKS ROAD  
#514  
DAVIE, FL 33314

**New Mailing Address:**

**FEI Number:** 27-2313822      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

LITTLE, JESSE H  
2867 SOUTH OASIS DRIVE  
BOYNTON BEACH, FL 33426      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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: CARROW, CAMERON P  
Address: 4350 OAKES ROAD, #514  
City-St-Zip: DAVIE, FL 33314 US

Title: VP  
Name: CONEY, PHILIP  
Address: 10505 N.W. 6TH STREET  
City-St-Zip: PEMBROKE PINES, FL 33026 US

Title: SCTY  
Name: LITTLE, JESSE  
Address: 2867 SOUTH OASIS DRIVE  
City-St-Zip: BOYNTON BEACH, FL 33426 US

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: PHILIP CONEY

VP

03/21/2012

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

\_\_\_\_\_  
Date