

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000088041

Entity Name: FIVE STAR PLUMBING, INC.

**FILED**  
**Apr 21, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4831 MIRAGE AVENUE  
HOLIDAY, FL 34690

**New Principal Place of Business:**

**Current Mailing Address:**

4831 MIRAGE AVENUE  
HOLIDAY, FL 34690

**New Mailing Address:**

FEI Number: 27-3820344

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

PESHKO, PAVEL  
4831 MIRAGE AVENUE  
HOLIDAY, FL 34690 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: PD  
Name: PESHKO, PAVEL  
Address: 4831 MIRAGE AVENUE  
City-St-Zip: HOLIDAY, FL 34690

Title: STD  
Name: PESHKO, SOFYA  
Address: 4831 MIRAGE AVENUE  
City-St-Zip: HOLIDAY, FL 34690

Title: VD  
Name: AVERKOV, VIKTOR  
Address: 1340 AMBERICA DRIVE E  
City-St-Zip: DUNEDIN, FL 34689

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: PAVEL PESHKO

PD

04/21/2011

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

\_\_\_\_\_  
Date