

**2007 FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 25, 2007 08:00 AM
Secretary of State**

DOCUMENT # P93000009682

1. Entity Name
B & R PLUMBING, INC.



Principal Place of Business
**5300 INLET WAY
FT. PIERCE, FL 34949**

Mailing Address
**5300 INLET WAY
FT. PIERCE, FL 34949**



01182007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3164760

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**BONEY, KAY
5300 INLET WAY
FT. PIERCE, FL 34949**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

U000000602401

01/26/07-80089-003 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	BONEY, JOSEPH
STREET ADDRESS	5300 INLET WAY
CITY-ST-ZIP	FT PIERCE, FL 34949
TITLE	V
NAME	RISLEY, RALSTON
STREET ADDRESS	7847 GOLF CIRCLE
CITY-ST-ZIP	MARGATE, FL 33063
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-22-07

Date

772-468-0021

Daytime Phone #