2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2004
Secretary of State

DOCUMENT# P94000009907

Entity Name: RANDY MASK PLUMBING, INC.

Current Principal Place of Business:

3569 WEBBER ST.
SARASOTA, FL 34239

New Principal Place of Business:

4430 ASHTON ROAD
SUITE C
SARASOTA, FL 34233

Current Mailing Address:

3569 WEBBER ST.
SARASOTA, FL 34239

New Mailing Address:

4430 ASHTON ROAD
SUITE C
SARASOTA, FL 34233

FEI Number: 65-0458369 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MALLETT, ROB
3569 WEBBER AVE.
SARASOTA, FL 34239 US

Name and Address of New Registered Agent:

MASK, RANDY D OWNER
4430 ASHTON ROAD
SUITE C
SARASOTA, FL 34233 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: RANDY D MASK 01/27/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MASK, MARION
Address: 2739 DATURA ST.
City-St-Zip: SARASOTA, FL 34239

Title: S ( ) Delete
Name: MASK, MARION
Address: 2739 DATURA ST.
City-St-Zip: SARASOTA, FL 34239

Title: P ( ) Delete
Name: MASK, RANDY
Address: 4164 WESTMINISTER DRIVE
City-St-Zip: SARASOTA, FL 34241

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: MASK, MARION
Address: 5639 COUNTRY WALK LANE
City-St-Zip: SARASOTA, FL 34233

Title: S (X) Change ( ) Addition
Name: MASK, MARION
Address: 5639 COUNTRY WALK LANE
City-St-Zip: SARASOTA, FL 34233

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RANDY D MASK PRES 01/27/2004
Electronic Signature of Signing Officer or Director Date