

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000009907

FILED
Feb 07, 2007
Secretary of State

Entity Name: RANDY MASK PLUMBING, INC.

Current Principal Place of Business:

4430 ASHTON ROAD
SUITE C
SARASOTA, FL 34233

New Principal Place of Business:

Current Mailing Address:

4430 ASHTON ROAD
SUITE C
SARASOTA, FL 34233

New Mailing Address:

FEI Number: 65-0458369

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASK, RANDY D OWNER
4430 ASHTON ROAD
SUITE C
SARASOTA, FL 34233 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: P (X) Change () Addition
Name: MASK, RANDY
Address: 25008 67TH AVENUE EAST
City-St-Zip: MYAKKA CITY, FL 34251

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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

MGR

02/07/2007

Electronic Signature of Signing Officer or Director

_____ Date