2004 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # P94000021743





1. Entity Name PLUMBER WORLD ENTERPRISES, INC.												
Principal Place of Business 1600 CYPRESS DRIVE JUPITER, FL 33469				Mailing Address 1600 CYPRESS DRIVE JUPITER, FL 33469							54007	
2. Principal Place of Business				3. Mailing Address								
Suite, Apt. #, etc.			S	Suite, Apt. #, etc.				02022004	Chg-P	CR2E03	4 (10/03)	
City & State			C	City & State				4. FEI Number 65-049			<u> </u>	plied For Applicable
Zip	Country Zi				try	5. Certificate of Stat			us Desired			
6. Name and Address of Current Registered Agent						Name		7. Name and	Address of New	Registered A	gent	
LODRICK, VIRGINIA 1600 CYPRESS DRIVE JUPITER, FL 33469						Street Address (P.O. Box Number is Not Acceptable)						
			City				FL	Zip Code)			
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 ag	ent and title if	when reinstating)	Γ	DATE						
FIL After M	E NOWIII ay 1, 200	FEE IS \$150.00 4 Fee will be \$55	0.00	9. Election Campai Trust Fund Contr	-	ncing	\$5. 0	00 May Be ad to Fees	* *************************************	<u> </u>	•	
10	OFFICERS AND DIRECTORS							ADDITIONS.	CHANGES TO OF	FICERS AND	DIRECTORS	IN 11
NAME STREET ADDRESS CITY-ST-ZIP	1600 CYF	., VIRGINIA PRESS DRIVE .FL 33469		☐ Delete							Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				□ Delete				3			☐ Change	☐ Addition
TITLE NAME .STREET ADDRESS- CITY-ST-ZIP				□ Delete		I .					☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	•	I .					Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete							☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delate	CITY	E ET ADDRESS - ST-ZIP					Change	Addition
12. Thereby	certify that th	e information supplied v	vitn this fil	ing does not qualify for	the exe	mption stated in	n See	ction 119.07(3)	(i), Fiorida Statutes	i. i turther certi	ry that the in	normation

indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it 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.