2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

FILED Feb 03, 2006 08:00 AM Secretary of State

Caytime Fixons #

	ANNUAL	REPORT		•	Secrets	ry of State
DOCUMENT # P9400049567 1. Entity Name				}	Secreta	ny or state
EDDIE R	OJAS PLUMBING INC.					
Principal Plac 880 N.E. 11		Mailing Address 880 N.E. 111TH STREET				
BISCAYNE P	ARK, FL 33161	BISCAYNE PARK, FL 33161		1 10 2 10 2 11	IN BIDIN BENIK BEKAL BEKAL DOKA BIDIN	1 2000 1220 1220 1220 1220 1220 1220 12
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DO NOT WRITE IN THIS SPA			CE	01192006 4. FEI Number	No Chg-P CR2	E034 (11/05)
				65-05020 5. Certificate of		\$8.75 Additional Fee Required
	5. Name and Address of Current F	egistered Agent				
ROJAS, E 880 NE 11 BISCAYNI				NOT WRIT HIS SPAC		
8. The above	named entity submits this statement for	the purpose of changing its register	ed office or register	red agent, or both,	in the State of Florida. 1 a	m familiar with, and accept
the obligat	tions of registered agent.				-	
SIGNATURE	Signature, typed or printed name of registered agent a	of this if expelicable. (NOTE, Registers	d Agent signature required	d when reinstating)	DATE	
	.E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.0	ncing \$5.	.00 May Be led to Fees		, ,	
10.	OFFICERS AND E	RECTORS	1		-	
TITLE NAME	PD ROJAS, EDUARDO	Alla. M	1			
STREET ADDRESS	880 NE 111 STREET		ł			
CITY-ST-ZIP	MIAMI, FL 33161		1			
TITLE	}		İ			
NAME STREET ADDRESS	(Ĭ.		บดติดติสหาชา	יכם
CITY-ST-ZIP					02/14/06-8002	20-008 150.00
NAME			1			
STREET ADDRESS			ł .	DO I	NOT WRIT	'F
CITY-ST-ZIP			-			
TITLE NAME	-		1	IN I	HIS SPAC	E
STREET ADDRESS			1			
CITY-ST-ZIP			1			
TITLE	{		į			
NAME STREET ADDRESS			1			
CHY-ST-ZIP						
TITLE			1			
NAME	1		{			
STREET ACCRESS CITY-ST-ZIP	^		l			
{	certify that the information smoothed with	his filing does not qualify for the ex	emptions contained	d in Chapter 119. I	Florida Statutes, I further of	ertily that the information
indicated of the co changed	certify that the information supplied with don this report or supplemental eport/is recration or the receiver or trusted empo , or on an attachment with each dress,	rue and accurate and that my signa fered to execute this report as requiting other like empowered.	iture shall have the ired by Chapter 60	same legal effect a 7, Florida Statutes;	as if made under cath; that and that my name appear	1 am an afficer or director s in Black 10 or Block 11 if