

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000087079

Entity Name: A PLUS PLUMBING, INC.

FILED
Jan 28, 2004
Secretary of State

Current Principal Place of Business:

2708 SW 1ST TERR
CAPE CORAL, FL 33991 US

New Principal Place of Business:

Current Mailing Address:

2708 SW 1ST TERR
CAPE CORAL, FL 33991 US

New Mailing Address:

FEI Number: 65-0544181

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANZALONE, THOMAS J
2708 SW 1ST TERRACE
CAPE CORAL, FL 33991 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: V () Delete
Name: ANZALONE, THOMAS J
Address: 2708 SW 1ST TERR
City-St-Zip: CAPE CORAL, FL 33991

Title: T () Delete
Name: HUMPHRIES, STANLEY D
Address: 425 S.E. 16TH PLACE
City-St-Zip: CAPE CORAL, FL 33990 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change () Addition
Name: LEWIS, ROBERT E
Address: 524 SE 16TH PLACE
City-St-Zip: CAPE CORAL, FL 33990 US

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: ROBERT E. LEWIS

T

01/28/2004

Electronic Signature of Signing Officer or Director

Date