2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2009
Secretary of State

DOCUMENT# P95000009880

Entity Name: CATALINA PLUMBING & MECHANICAL, INC.

Current Principal Place of Business:

718 NE 2ND AVE
FT LAUDERDALE, FL 33304

New Principal Place of Business:

Current Mailing Address:

718 NE 2ND AVE
FT LAUDERDALE, FL 33304

New Mailing Address:

FEI Number: 65-0550388 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TUCKER, WILLIAM D
718 N.E. 2ND AVENUE
FORT LAUDERDALE, FL 33304 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: DS ( ) Delete
Name: BENEVENTIN, LINDA
Address: 3102 NW 107TH DR
City-St-Zip: SUNRISE, FL 33351

Title: P ( ) Delete
Name: BENEVENTIN, LINDA
Address: 3102 NW 107 DR.
City-St-Zip: SUNRISE, FL 33351

Title: T ( ) Delete
Name: BENEVENTIN, FRANK
Address: 3102 NW 107 DR.
City-St-Zip: FORT LAUDERDALE, FL 33351

Title: VP ( ) Delete
Name: SNYDER, GREG V
Address: 4343 NW 114 AVE
City-St-Zip: SUNRISE, FL 33323

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: LINDA BENEVENTIN DS 03/24/2009

Electronic Signature of Signing Officer or Director Date