

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 27, 2007 08:00 AM
Secretary of State

DOCUMENT # P95000014678

1. Entity Name
**COMMERCIAL AND HOME POOL PLUMBING
CORPORATION**



Principal Place of Business
**11751 S.W. 168TH TERRACE
MIAMI, FL 33177**

Mailing Address
**11751 S.W. 168TH TERRACE
MIAMI, FL 33177**



03222007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0572635

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**TUCKER, WILLIAM D.
11751 S.W. 168TH TERRACE
MIAMI, FL 33177**

**DO NOT WRITE
IN THIS SPACE**

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

William D Tucker **WILLIAM D TUCKER, PRES.**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when reinstating)

4-24-07
DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP TUCKER, BILL 11751 SW 168TH TERR MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP TUCKER, ELIZABETH 11751 SW 138TH TERR MIAMI, FL
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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05/11/07-80012-010 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

William D Tucker **WILLIAM D TUCKER**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-24-07 305-235-7901