

# **2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P95000071153

**FILED**  
**Jun 14, 2007**  
**Secretary of State**

**Entity Name:** ALL DUNG SEWER AND DRAIN CLEANING, INC.

**Current Principal Place of Business:**

6125 62ND AVE NORTH  
PINELLAS PARK, FL 33781 US

**New Principal Place of Business:**

**Current Mailing Address:**

6125 62ND AVE NORTH  
PINELLAS PARK, FL 33781 US

**New Mailing Address:**

**FEI Number:** 65-0610844

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COUGHLIN, JOHN  
6125 62ND AVE NORTH  
PINELLAS PARK, FL 33781 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

**OFFICERS AND DIRECTORS:**

Title: PSTD ( ) Delete  
Name: COUGHLIN, JOHN  
Address: 6125 62ND AVE NORTH  
City-St-Zip: PINELLAS PARK, FL 33781

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: SEC ( ) Change (X) Addition  
Name: COUGHLIN, MARY L MRS.  
Address: 6125 62ND AVE NORTH  
City-St-Zip: PINELLAS PARK, FL 33781

Title: VP ( ) Change (X) Addition  
Name: THOMAS, JAMES R  
Address: 6821 77TH TERRACE NORTH  
City-St-Zip: PINELLAS PARK, FL 33781

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: JOHN COUGHLIN

PSTD

06/14/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date