2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P95000097277

1. Entity Name

GULFCOAST PLUMBING CORPORATION



US

FILED Apr 11, 2007 08:00 A Secretary of State

Principal Place of Business

HARMON, MICHAEL

5326 ASHTON CT SARASOTA, FL 34233 Mailing Address

5326 ASHTON CT

SARASOTA, FL 34233

5326 ASHTON CT

SARASOTA, FL 34233



| DO NOT WRITE | IN. | THIS | SPA | CE |
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6. Name and Address of Current Registered Agent

04042007

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0629070

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

| | ove named entity submits this statement for the pigations of registered agent. | surpose of changing its register | , | | ooth, in the State of Florida. I am familiar with, and | |
|---------|--|--|--------------------|---|--|---------|
| SIGNATU | | f applicable. (NOTE: Register | ed Agent signaturi | required when reinstating) | DATE | |
| | FILE NOWII! FEE IS \$150.00 May 1, 2007 Fee will be \$550.00 | Election Campaign Fina Trust Fund Contribution. | | \$5.00 May Be Added to Fees | | |
| 10. | OFFICERS AND DIRECTORS | | | | The state of the s | · · · . |
| TITLE | PVST | | | , | | |

HARMON, MICHAEL STREET ADDRESS 5326 ASHTON CT CITY-ST-ZIP SARASOTA, FL 34233 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

DO NOT WR IN THIS SPACE

12. I hereby certify that the information supplied with this filling 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:

STREET ADDRESS CITY-ST-ZIP