2005 FOR PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

SIGNATURE:

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR FIGHTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 26, 2005 08:00 AM Secretary of State DOCUMENT # P96000069134 1. Entity Name PAUL A. JACKSON PLUMBING, INC. Principal Place of Business Mailing Address 801 NW SECOND AVENUE 801 NW SECOND AVENUE HALLANDALE, FL 33009 HALLANDALE, FL 33009 01062005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0844811 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent JACKSON, PAUL A DO NOT WRITE 801 NW SECOND AVENUE HALLANDALE, FL 33009 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. DATE Signature, lyped or printed name of registered agent and title if applicable. INOTE, Registered Agent signature required when reinstaling) FILE NOWIII FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE JACKSON, PAUL A NAME 801 NW SECOND AVENUE STREET ADDRESS U00000196412 01/26/05-80067-016 150.00 CITY-SI-ZIP HALLANDALE, FL 33009 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS.

12. I hereby certify that the information supplied with this filing does not qualify 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 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

FILED