2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000079498

1. Entity Name

Principal Place of Business

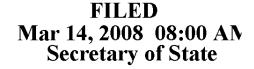
ARTISTIC PLUMBING CONCEPTS, INC.



Mailing Address

28286 TRIBUNE BLVD
PUNTA GORDA, FL 33955

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PUNTA GORDA, FL 33955





DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

02292008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0697732

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

VYER CHARTERED

6. Name and Address of Current Registered Agent

AMERILAWYER CHARTERED 343 ALMERIA AVENUE CORAL GABLES, FL 33134

SIGNATURE:

DO NOT WRITE IN THIS SPACE

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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature rec				required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.				\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS	7.	N	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD DILLOW, KIMBERLY K 171 GULF VIEW ROAD PUNTA GORDA, FL 33950				
TITLE NAME STREET ADDRESS CITY-SI-ZIP	VSD DILLOW, KEVIN L 171 GULF VIEW ROAD PUNTA GORDA, FL 33950		A STATE OF THE STA		04/01/08-80012-002 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			4 1 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN T	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. Thereby 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.					