

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P97000061652

FILED
Oct 24, 2008
Secretary of State

Entity Name: BIG PLUMBING CORPORATION

Current Principal Place of Business:

9190 NW 119 STREET
BAY 10
HIALEAH GARDENS, FL 33018

New Principal Place of Business:

Current Mailing Address:

9190 NW 119 STREET
BAY 10
HIALEAH GARDENS, FL 33018

New Mailing Address:

FEI Number: 65-0767392

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LATRAS, ABRAHAM
8753 N.W. 140 LANE
MIAMI, FL 33118 US

Name and Address of New Registered Agent:

LATRAS, ABRAHAM
8180 N.W. 166 ST.
MIAMI LAKES, FL 33016 US

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: ABRAHAM LATRAS

10/24/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LATRAS, ABRAHAM
Address: 8753 NW 140 LN
City-St-Zip: MIAMI, FL 33018

Title: SD () Delete
Name: GONZALEZ, ARMANDO
Address: 654 EAST 51 ST.
City-St-Zip: HIALEAH, FL 33013

Title: TD () Delete
Name: PEREZ, ANTONIO
Address: 245 WEST 63RD STREET
City-St-Zip: HIALEAH, FL 33012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LATRAS, ABRAHAM
Address: 8180 NW 166 ST.
City-St-Zip: MIAMI LAKES, FL 33016

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

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

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: ABRAHAM LATRAS

PD

10/24/2008

Electronic Signature of Signing Officer or Director

Date