2004 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State **DOCUMENT # P97000067999** 07-19-2004 90114 001 *1,100.00 NAGELBUSH PLUMBING, INC. Principal Place of Business Mailing Address 5126 CHARDONNAY DRIVE **5126 CHARDONNAY DRIVE** CORAL SPRINGS, FL 33067 CORAL SPRINGS, FL 33067 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/03) 04212004 Cha-P City & State City & State 4. FEI Number Applied For 65-0774760 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name STEPHEN KORNFELD SMITH, RICHARD A Street Address (P.O. Box Number is Not Acceptable) 5385 NOB HILL ROAD **5126 CHARDONNAY DRIVE** CORAL SPRINGS, FL 33067 Zip Code 33351 SUNRISE se of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept 8. The above nar sulamits th the obligation (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11, PD TITLE ☐ Delete TITLE ☐ Change Addition NAME SMITH, RICHARD A NAME STREET ADDRESS 5126 CHARDONNAY DRIVE STREET ANYMESS CITY-ST-ZIP CORAL SPRINGS, FL 33067 CITY-ST-ZIP TITLE TIFLE ☐ Change Addition ☐ Delete NAME NAME NAGELBUSH, JEROME STREET ADDRESS STREET ADDRESS 5385 NOB HILL RD CITY-ST-73P CRY-ST-72P SUNRISE, FL 33351 TILLE TITLE Addition □ Delete Change NAME NAME NAGEBUSH, LARRY STREET ADDRESS STREET ADDRESS 5385 NOB HILL RD CITY-ST-ZIP CITY-ST-ZIP SUNRISE, FL 33351 TITLE VP/Sec ☐ Change Addition TITLE Delete NAME NAME MANKUTA, AMY STREET ADDRESS STREET ADDRESS 5385 NOB HILL RD CITY-ST-ZIP CITY-ST-ZIP SUNRISE, FL 33351 Addition TITLE TITLE CEO Delete ☐ Change NAME NAME STEPHEN KORNFELD STREET ADDRESS STREET ADDRESS 5385 NOB HILL ROAD CITY-ST-ZIP CITY-ST-7IP SUNRISE, FL 33351 ПLE Defete TITLE Change ☐ Addition NAME NAME STORET ADDORESS STREET ADDRESS CITY-ST-ZIP 📜 CITY-ST-7IP 12. It 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 suppliermental 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.

FILED

Jul 19, 2004 8:00 am