

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000095850

1. Entity Name
PETE'S PLUMBING & GAS, INC.



Principal Place of Business
2031 SW 70 AVE
C-4
DAVIE, FL 33317

Mailing Address
POST OFFICE BOX 292338
FORT LAUDERDALE, FL 33329

FILED
Aug 21, 2008 08:00 AM
Secretary of State



01072008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0792422

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MARLEY, PETER K
2031 S.W. 70 AVENUE
C-4
FORT LAUDERDALE, FL 33317

**DO NOT WRITE
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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

DATE
08/21/08-80005-017 550.00

10. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	MARLEY, PETER K
STREET ADDRESS	2031 SW 70 AVE C-4
CITY-ST-ZIP	DAVIE, FL 33317
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PETER K MARLEY

1-7-08

9548352299

Daytime Phone #