

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000023571

FILED
Mar 22, 2009
Secretary of State

Entity Name: NO PROBLEM CONSTRUCTION AND PLUMBING SERVICES, INC.

Current Principal Place of Business:

P.O. BOX 840009
HOLLYWOOD, FL 33084

New Principal Place of Business:

1011 SHERIDAN STREET, STE. 310
HOLLYWOOD, FL 33084

Current Mailing Address:

P.O. BOX 840009
HOLLYWOOD, FL 33084

New Mailing Address:

FEI Number: 65-0824214 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

TRAGER, ROSS
1011 SHERIDAN STREET, STE. 310
COOPER CITY, FL 33026 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: APEL, HENRY
Address: 11011 SHERIDAN STREET STE. 310
City-St-Zip: COOPER CITY, FL 33026

Title: D () Delete
Name: PAVOLIC DRUZHININ, ANATOLY
Address: 1011 SHERIDAN STREET, STE. 310
City-St-Zip: COOPER CITY, FL 33026

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: HENRY APEL

D

03/22/2009

Electronic Signature of Signing Officer or Director

Date