

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

FILED

DOCUMENT # P98000091084

1. Entity Name

RESIDENTIAL PLUMBING SERVICES, INC.

02 NOV 18 AM 10:19

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

300009045883  
11/18/02--01042--002 \*\*150.00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 9144 W. ATLANTIC BLVD. Suite, Apt. #, etc. 816 City & State CORAL SPRINGS, FL Zip 33071 Country USA		3. Mailing Address 9144 W. ATLANTIC BLVD. Suite, Apt. #, etc. 816 City & State CORAL SPRINGS, FL Zip 33071 Country USA		4. FEI Number 65-0875087 Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name  
DANIEL G. GASS  
Street Address (P.O. Box Number is Not Acceptable)  
10001 NW 50 STREET #204

City  
SUNRISE FL Zip Code  
33351

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE  
NAME  
D  
STREET ADDRESS  
VINCENT CEVASCO  
CITY-ST-ZIP  
9144 W. ATLANTIC BLVD. #816  
CORAL SPRINGS, FL 33071

TITLE  
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

VINCENT CEVASCO

11/07/02

(954) 227-7433

Daytime Phone #

CR2E034B (12/01)

W. B. D. Accounting, Inc.

10001 N.W. 50th Street  
Suite 204  
Sunrise, FL 33351

(954) 746-0156  
Fax: (954) 746-7690

November 7, 2002

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: RESIDENTIAL PLUMBING SERVICES, INC.  
FEIN: 65-0875087

Dear Sir/Madam:

Please be advised that we represent the above-referenced client. Upon review of our records, we found that our client never received his Uniform Business Report. Immediately on learning of this, our client called your office and was told to submit a Report with a check for \$150.00 and a letter requesting a one-time exemption of waiver for the reinstatement fee.

To this end, we enclose the UBR and a check for this amount. We thank you for your attention to this matter and for your indulgence in this case. If you have any questions, or need additional information, please contact us.

Very truly yours,  
WBD ACCOUNTING, INC.



David B. Lanter, CPA

DBL:tb

Enclosures

cc: Client