
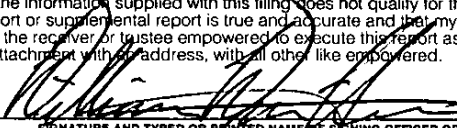


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 01, 2005 8:00 am
Secretary of State

08-01-2005 90027 023 ***158.75

DOCUMENT # P99000046910 1. Entity Name ALL-PRO PLUMBING & DRAIN CLEANING, INC.					
Principal Place of Business 301 PALMETTO ST. W. PALM BCH, FL 33405			Mailing Address 301 PALMETTO ST. W. PALM BCH, FL 33405		
2. Principal Place of Business <i>(New address)</i> 1059 Carambola Cir Suite, Apt. #, etc.			3. Mailing Address 1059 CARAMBOLA CIR Suite, Apt. #, etc.		
City & State West. P. Bch., FL Zip 33406		City & State WPB, FL Zip 33406		Country USA	
4. FEI Number 65-0916384		Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input checked="" type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HOUSE, WAYNE 301 PALMETTO ST. W. PALM BCH, FL 33405			7. Name and Address of New Registered Agent Name HOUSE, WAYNE Street Address (P.O. Box Number is Not Acceptable) 1059 CARAMBOLA CIR. WPB, FL 33406 City FL Zip Code 33406		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE</small>					
FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVS HOUSE, WILLIAM W 301 PALMETTO ST. W. PALM BEACH, FL 33405 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVS HOUSE, WILLIAM W. 1059 CARAMBOLA CIRCLE WPB, FL 33406 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I 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 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: 			Date 7/26/05 Daytime Phone # 561-719-4141		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

ATTACHMENT

P99000046910
50058928

1059 Carambola Circle
West Palm Beach, FL 33406
Office 561-582-9292
Fax 561- 582-3809

All-Pro Plumbing & Drain Cleaning, Inc.

July 26, 2005

Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

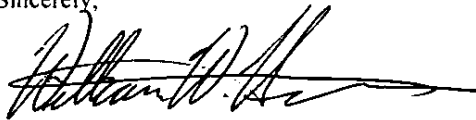
To Whom It May Concern:

I am requesting via this letter, that the \$400.00 late fee be waived due to not receipt of the Annual Report Notice.

Please note that there is a change of address on the enclosed form.

Thank you for your consideration in this matter.

Sincerely,



William W. House
President