

2006 FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Please FILED me a copy
of my Tax F.R.C. Card
Thank You Very much
God Bless

DOCUMENT # P99000085976 1. Entity Name DERRICK THE PLUMBER, INC.																													
Principal Place of Business 510 NW 134TH ST. STE 101 NORTH MIAMI FL 33168			Mailing Address 510 NW 134TH ST. STE 101 NORTH MIAMI FL 33168																										
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.																										
City & State			City & State																										
Zip		Country		4. FEI Number 65-0982160																									
5. Certificate of Status Desired ☒		Applied For Not Applicable																											
6. Name and Address of Current Registered Agent WILSON, DERRICK A SR. 510 NW 134TH ST. NORTH MIAMI FL 33168																													
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																													
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 is applicable (NOTE: Registered Agent signature required when reconstituting)																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State 9. Election Campaign Financing Trust Fund Contribution. ☐																													
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;">D</td> <td style="width: 10%; text-align: center;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>WILSON, DERRICK A SR.</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>510 NW 134TH ST.</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>NORTH MIAMI FL 33168</td> <td></td> </tr> </table> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;"></td> <td style="width: 10%; text-align: center;">☐ Change ☐ Add</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> </table>						TITLE	D	☐ Delete	NAME	WILSON, DERRICK A SR.		STREET ADDRESS	510 NW 134TH ST.		CITY- ST- ZIP	NORTH MIAMI FL 33168		TITLE		☐ Change ☐ Add	NAME			STREET ADDRESS			CITY- ST- ZIP		
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I certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information in 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 as an attachment with an address, with all other like empowered.

E:

10 April 06