2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S28074

FILED Apr 05, 2006 Secretary of State

Entity Name: MASTER PLUMBING OF SOUTH FLORIDA, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
1304 SW 160 AVE				
101 FORT LAUDERDALE, F	FL 33326			
Current Mailing Addre	ss:	New Mailing Address	5:	
1304 SW 160 AVE				
101 FORT LAUDERDALE, F	FL 33326 US			
FEI Number: 65-0255549	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address o	Name and Address of New Registered Agent:	
HASSENPLUG, PAUL				
	6			
DAVIE, FL 33325 US The above named entity		purpose of changing its registered	d office or registered agent, or both,	
DAVIE, FL 33325 US The above named entity n the State of Florida.		purpose of changing its registered	d office or registered agent, or both,	
DAVIE, FL 33325 US The above named entity n the State of Florida. BIGNATURE:			d office or registered agent, or both, Date	
DAVIE, FL 33325 US The above named entity n the State of Florida. BIGNATURE: Electro	submits this statement for the			
The above named entity n the State of Florida. SIGNATURE: Electro	submits this statement for the nic Signature of Registered Aging Trust Fund Contribution ().	ent		
DAVIE, FL 33325 US The above named entity not the State of Florida. SIGNATURE: Electro Electron Campaign Financir OFFICERS AND DIRECTION Fittle: DP (Name: HASSENPLUGAND STATES STA	submits this statement for the sinic Signature of Registered Aging Trust Fund Contribution (). CTORS:) Delete 6, DAVE,	ent ADDITIONS/CHANGE	Date	

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID G. HASSENPLUG DP 04/05/2006