

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S98820

**FILED**  
**Jan 09, 2012**  
**Secretary of State**

**Entity Name:** A BACKFLOW CERTIFICATION CO.

**Current Principal Place of Business:**

610 NE 24 ST  
POMPANO BEACH, FL 33064

**New Principal Place of Business:**

**Current Mailing Address:**

610 NE 24 ST  
POMPANO BEACH, FL 33064

**New Mailing Address:**

**FEI Number:** 65-0302696

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MICHAEL C. KLASFELD, P.A.  
2424 NE 22ND STREET  
POMPANO BEACH, FL 33062 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

**OFFICERS AND DIRECTORS:**

Title: PST  
Name: BAILEY, JAMES  
Address: 610 NE 24 ST  
City-St-Zip: POMPANO BEACH, FL 33064

Title: V  
Name: BAILEY, MARJORIE D  
Address: 610 NE 24 ST  
City-St-Zip: POMPANO BEACH, FL 33064

I hereby 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 all other like empowered.

SIGNATURE: JAMES BAILEY

PST

01/09/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date