## 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

changed, or on an attach

SIGNATURE:

## Apr 19, 2004 8:00 am Secretary of State **DOCUMENT # V67208** 1. Entity Name 04-19-2004 90301 007 \*\*\*150.00 AQUA PLUMBING OF DADE, INC. Principal Place of Business Mailing Address 20120 EAGLE NEST ROAD 20120 EAGLE NEST ROAD 94055644 MIAMI FL 33189 US MIAMI FL 33189 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) 4. FEI Number City & State City & State Applied For 65-0359523 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HILL, RICHARD W 9480 SW 188 STREET MIAMI FL 33157-7902 8. The above named his 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 obligation SIGNATURE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ח ☐ Ďelete TITI E ☐ Change Addition HILL. RICHARD W NAME NAME 9480 SW 188 STREET STREET ADDRESS STREET ADDRESS MIAMI FL 33157 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ÎITLE ☐ Defete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change THIE TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Addition TITLE Delete Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP his filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information rue and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director wered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if 12. I hereby certify that the informati indicated on this report or supply of the corporation or the re

like empowered

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