

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000011591

**Entity Name:** AMERICAN ALLSTATE BACKFLOW SPECIALISTS, INC.

**Current Principal Place of Business:**

4800 S.W. 64 AVE., STE. 102A  
DAVIE, FL 33314

**FILED**  
**Apr 03, 2014**  
**Secretary of State**  
**CC4038456011**

**Current Mailing Address:**

4800 S.W. 64 AVE., STE. 102A  
DAVIE, FL 33314

**FEI Number: 65-0893233**

**Certificate of Status Desired: No**

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

MCCAULEY, COLIN  
3921 NW 78TH TERRACE  
DAVIE, FL 33024 US

*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

**Officer/Director Detail :**

Title PS  
Name MCCAULEY, COLIN  
Address 3921 N.W. 78 TERR.  
City-State-Zip: HOLLYWOOD FL 33024

Title EVPT  
Name MCCAULEY, MARTHA  
Address 3921 N.W. 78 TERR.  
City-State-Zip: HOLLYWOOD FL 33024

*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: MARTHA MCCAULEY**

**VICE PRESIDENT**

**04/03/2014**

Electronic Signature of Signing Officer/Director Detail

Date