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.	

Electronic Signature of Registered Agent

### Dete: . ... /**D** ·

Officer/Director Detail :						
Title	D	Title	PST			
Name	CUDDY, WILLIAM	Name	CUDDY, WILLIAM			
Address	2311 HENDERSON DR #A	Address	2311 HENDERSON DR #A			
City-State-Zip:	ORLANDO FL 32806-2473	City-State-Zip:	ORLANDO FL 32806-2473			

## Name and Address of Current Registered Agent:

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: EMERALD PLUMBING OF CENTRAL FLORIDA, INC

ORLANDO, FL 32806-2473

2311 HENDERSON DR

#A

#A

**Current Mailing Address:** 2311 HENDERSON DR

DOCUMENT# P99000029907

#A

FEI Number: 59-3567393

ORLANDO, FL 32806 US

CUDDY, WILLIAM 2311 HENDERSON DR

SIGNATURE:

# ORLANDO, FL 32806-2473

**Current Principal Place of Business:** 

### 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.

PRESIDENT

01/30/2018

Date

Electronic Signature of Signing Officer/Director Detail

### FILED Jan 30, 2018 Secretary of State CC7357161614

Certificate of Status Desired: No

Date