FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

APPROVED AND FILED

95 MAY 11 PM 8:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 519025 (1)

1. Corporation Name
BAYVIEW POOL SERVICE, INC.

Principal Place of Business
1039 NE 44TH ST
OAKLAND PARK FL 33334

Mailing Address
1039 NE 44TH ST
OAKLAND PARK FL 33334

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/23/1976
3a. Date of Last Report: 04/05/1994

4. FEI Number: 59-1708687 — Applied For / Not Applicable

5. Certificate of Status Desired [ ] — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] — $5.00 May Be Added to Fees

2. Principal Place of Business | 2a. Mailing Address

21 | 26
22 Suite, Apt. #, etc. | 27 Suite, Apt. #, etc.
23 City & State | 28 City & State
24 Zip | 25 Country | 29 Zip | 30 Country

8. Florida Statutes [ ] Yes [ ] No

9. Name and Address of Current Registered Agent

BRIGGS, BARRY D.
4538 N.E. 22 RD.
FT. LAUDERDALE FL 33308

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 617.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE: PD
NAME: BRIGGS, BARRY D
STREET ADDRESS: 1039 NE 44TH ST
CITY-ST-ZIP: OAKLAND PARK, FL 00000

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

[ ] Change [ ] Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on the annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: BARRY D. BRIGGS Barry D. Briggs 5/3/95 3054910994

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0238398 CP