


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2007 08:00 AM
Secretary of State

DOCUMENT # F06000003754
 1. Entity Name
 BLUE HAVEN POOLS & SPAS SUPPLIES DIRECT, INC.



Principal Place of Business 636 BROADWAY, STE. 310 SAN DIEGO, CA 92101	Mailing Address 636 BROADWAY, STE. 310 SAN DIEGO, CA 92101
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DO NOT WRITE IN THIS SPACE



01102007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-2760987	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 CORPORATE CREATIONS NETWORK INC.
 1138 PROSPERITY FARMS RD., #221
 PALM SPRINGS GARDENS, FL 33410

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

000000592806
 01/22/07-80005-019-150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT LAZLO, R'NELLE 636 BROADWAY, STE. 310 SAN DIEGO, CA 92101
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS EISMAN, BILLY D. 636 BROADWAY, STE. 310 SAN DIEGO, CA 92101
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DEL NEGRO, PHIL 636 BROADWAY, STE. 310 SAN DIEGO, CA 92101
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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, trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with another like company.

SIGNATURE: Phil Del Negro **1-18-07** **619-233-4639**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #