


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2006 08:00 AM
Secretary of State

DOCUMENT # M25356
 1. Entity Name
 NIAGARA POOLS INC.



Principal Place of Business Mailing Address
 8220 SW 185TH ST. 8220 SW 185TH ST.
 MIAMI, FL 33157 MIAMI, FL 33157

DO NOT WRITE IN THIS SPACE



01262006 No Chg-P CRZE034 (11/05)

4. FEI Number Applied for
 59-2620774 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 KIRSCHNER, HENRY E.
 8220 SW 185TH ST.
 MIAMI, FL 33157

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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 _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

11000003421981
 02/16/06-80060-001 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP KIRSCHNER, HENRY E. 8220 SW 185TH ST. MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KIRSCHNER, SANDRA 8220 SW 185TH STREET MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ECKHARDT, SCOTT 8220 SW 185TH ST. MIAMI, FL
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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 or 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 all other like empowered.

SIGNATURE: Henry E. Kirschner Date: 2/2/06 Daytime Phone #: 305 253 2081
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR