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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M71624

1. Corporation Name PRESTIGE POOL PLASTERING, INC.



Principal Place of Business 7228-C WESTPORT PL WEST PALM BEACH FL 33413

Mailing Address 7228-C WESTPORT PL WEST PALM BEACH FL 33413

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/07/1988

2. Principal Place of Business

2a. Mailing Address

4. FEI Number 65-0038164

Applied For Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

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

23 City & State

27 City & State

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

24 Zip Country 25

29 Zip Country 30

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MAHONEY, BRIAN A. 7288 C WESTPORT AVE WEST PALM BEACH FL 33413

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 607.1508, 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P MAHONEY, BRIAN ALAN DELETED STREET ADDRESS 7228C WESTPORT PLACE CITY-ST-ZIP WEST PALM BEACH FL

1.1 TITLE Change Addition 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

TITLE ST CORNELIUS, PATTI-LEE DELETED STREET ADDRESS 7228C WESTPORT PLACE CITY-ST-ZIP WEST PALM BEACH FL

2.1 TITLE Change Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

TITLE DELETED STREET ADDRESS CITY-ST-ZIP

3.1 TITLE Change Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

TITLE DELETED STREET ADDRESS CITY-ST-ZIP

4.1 TITLE Change Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

TITLE DELETED STREET ADDRESS CITY-ST-ZIP

5.1 TITLE Change Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

TITLE DELETED STREET ADDRESS CITY-ST-ZIP

6.1 TITLE Change Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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, with all other like empowered.

SIGNATURE: [Signature] REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)