2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 07, 2002 8:00 am
Secretary of State
02-07-2002 90182 020 ***150.00

DOCUMENT #: P00000067553

1. Entity Name
NEIGHBORHOOD POOL SERVICE, INC.

Principal Place of Business	Mailing Address
6225 NW 181 TERR. MIAMI FL 33015	6225 NW 181 TERR. MIAMI FL 33015

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
P.O. BOX 172141	P.O. BOX 172141
Suite, Apt. #, etc.	Suite, Apt. #, etc
City & State: MIAMI, FL.	City & State: MIAMI, FL.
Zip: 33017 Country: USA	Zip: 33017 Country: USA

4. FEI Number 65-1024464 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SAMPER, JESUS ~~6225 NW 181 TERR.~~ ~~MIAMI FL 33015~~ Address change	Name: Street Address (P.O. Box Number is Not Acceptable): 7923 NW 198 Street # City: Miami FL Zip Code: 33015

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.

SIGNATURE: Samper Jesus Samper 1-21-02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After May 1, 2002 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PTD SAMPER, JESUS 6225 NW 181 TERR. MIAMI FL 33015 ☐ Delete	TITLE / NAME / STREET ADDRESS (circled) / CITY-ST-ZIP	☒ Change ☐ Addition P.O. BOX 172141 MIAMI, FL. 33017
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD SAMPER, JANET 6225 NW 181 TERR. MIAMI FL 33015 ☐ Delete	TITLE / NAME / STREET ADDRESS (circled) / CITY-ST-ZIP	☒ Change ☐ Addition P.O. BOX 172141 MIAMI, FL. 33017
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13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Samper Jesus Samper 1-21-02 7864124373
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (9/01)