


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 28, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # P03000007656**  
 1. Entry Name  
 POOL & COOL, CORP.



Principal Place of Business  
 13025 SW 87 AVENUE  
 MIAMI, FL 33176

Mailing Address  
 P. O. BOX 160583  
 MIAMI, FL 33116

**DO NOT WRITE IN THIS SPACE**



01202008 No Chg-P CR2E034 (11/05)

4. FEI Number 76-0723116	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

DEVOTO, JOSE A  
 10252 SW 127 PL  
 MIAMI, FL 33186

**DO NOT WRITE IN THIS SPACE**

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, 2008 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DEVOTO, JOSE A 10252 SW 127 PL MIAMI, FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FERRECCIO, MARIELLA 10252 SW 127 PL MIAMI, FL 33186
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 02/01/08-80043-002 150.00

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:**  **1/19/08**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #