2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 16, 2007 08:00 AM Secretary of State

ANNUAL REFORT			Apr 16, 2007 08:0		
DOCUMENT # P9900001543 1. Entity Name C & A POOLS, INC					Secretary of Sta
2860 NW 70 AVE	Mailing Address 2860 NW 70 AVE MARGATE, FL 33063				
DO NOT WRITE I		CE	04122007 4. FEI Numb 65-090	No Chg-P	CR2E034 (11/05) Applied For Not Applicable \$8.75 Additional Fee Required
6. Name and Address of Current Regi VALENZUELA, ALVARO F 2860 NW 70 AVE MARGATE, FL 33063	stered Agent			NOT W	
8. The above named entity subports this statement for the the obligations of registered agent. SIGNATURE SI	rif applicable. (NOTE: Registere	id Agent signature required	when reinstating)		DATE 100.00
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 10. OFFICERS AND DIRE	Selection Campaign Finar Trust Fund Contribution. CTORS		00 May Be ed to Fees	U47657U(-80047-019 150.00
TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE NAME NAME NAME NAME NAME NAME				NOT W THIS SF	
STREET ADDRESS CITY-S1-ZIP					

12. I hereby certify that the information supplied with his filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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 ampowered 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 appears, with all other like empowered.

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

MATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #