## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of \$tate DIVISION OF CORPORATIONS

DOCUMENT # 693134
COSMIC POOL SERVICE, INC.

(9)

**FILED** May 19 1997 8:00am Secretary of State

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Principal Place	Inolpal Place of Business Mailing Address			1 10011 0111 1100 1111 1100	#1#11 B1211 #11	#11 #1#16 #FE1	1 01011 (100)	
4731 NE 3 TER FT. LAUDERDA		4731 NE 3 TERRACE FT. LAUDERDALE FL 33334-600						
: :: ::					3. Date Incorporated or Qualified 06/25/1981	3a. Date of Last Report 04/23/1996		
	ace of Business	2a. Mailing Address	<del></del>		4. FEI Number 59-2125062			pplied For
0.40 4.1	4 .1.	26	<del></del>		39-2123002			ot Applicable
Suite, Apt. (	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional equired
City & State	)	City & State	- !		Election Campaign Financing     Trust Fund Contribution			May Be to Fees
Zip	Country	Zip	Dountr	У	B. This corporation has liability for i	intangible t		
4	25	29 30	0				] No	
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Re	gistered A	gent	
	ITANTINO, JOSEPH L JR		8	Name				
	INVERRARY OR APT 507		82	2 Street Ad	dress (P.O. Box Number is Not Acceptab	ile)		
FT. I	LAUDERDALE FL 33319		83					
			84				Tap 7in	Code
			.   84	City		FL	<b>85</b> Zip	Code
office or re agent, I ar SIGNATURE	o the provisions of Sections 607.05 aglatered agent, or both, in the Stat in familia with, and occept the obli-	02 and 607.1508, Florida Statutes, e of Florida Such change was aut gations of, Section 607.0505, Florid	, the about the horized by the Statute	ve-named co by the corpor es.	orporation submits this statement for the pration's board of directors. I hereby accept	orpose of o	changing i intment as	s registered
	Signature typed or printed name of registered a	pont and title if applicable. (NOTE: F	Registered A	gont signature red	quired when reinstating)	DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC			RS IN 12
TITLE	PD COSTANIENS CICILIANS	☐ DELETE	H.1 TITLE			ι	Change	☐ Addition
NAME	COSTANTINO, RICHARD L		1.2 NAME					
STREET ADDRESS	4164 INVERRARY DR #507		H.3 STREE	T ADDRESS				
CITY-ST-ZIP	FT. LAUDERDALE FL		1.4 CITY					
TITLE		☐ DELETE	2.1 TITLE			Į.	Change	■ Addition
NAME			2.2 NAME	1				
STREET ADDRESS			2.3 STREE	T ADDRESS				
CITY-ST-ZIP			2.4 CITY					F74 22 202
TITLE		DELETE	3.1 TITLE			l.	Change	Addition
NAME			3.2 NAME	· · · · · · · · · · · · · · · · · · ·				
STREET ADDRESS	×			T ADDRESS				
CITY-\$T-Z#P		Delese	3.4. CITY				Change	Addition
TITLE		☐ DELETE	4.1 TITLE			L	Change	Addition
NAME			4. 2 NAM	1				
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP		DELETE	4.4 CITY- 5.1 TITLE				Change	Addition
NAME		المام المام	5.2 NAME	į į		L	- Ollarige	L AUGINOIT
STREET ADDRESS			E :	T ADDRESS				
CITY-ST-ZIP			5.4 CITY					
TITLE		DELETE	6.1 TITLE				Change	Addition
NAME			62 NAME	ł		,	- Crimingo	
STREET ADDRESS			1	T ADDRESS				
CITY-\$T-ZIP			1					
14. I do hereb	y certify that the information suppli	ed with this filing does not qualify	6.4 CITY-	emption stat	ted in Section 119.07(3)(i), Florida Statute	s. I further	certify that	t the
information	n indicated on this annual report or	supplemental annual report is true	e and acc	curáte and th	hat my signature shall have the same lega port as required by Chapter 607, Florida S	al effect as	if made un	nder nath: that