

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000035086

Entity Name: SUNSHINE POOLS & SPA SPECIALISTS, INC.

Current Principal Place of Business:

4962 NW 97TH PL
DORAL, FL 33178

Current Mailing Address:

PO BOX 226141
MIAMI, FL 33222

FEI Number: 20-8766041

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MONTALVO, LUIS A
4962 NW 97TH PL
DORAL, FL 33178 US

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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name MONTALVO, LUIS A
Address 4962 NW 97TH PL
City-State-Zip: DORAL FL 33178

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: LUIS MONTALVO

P

04/29/2013

Electronic Signature of Signing Officer/Director Detail

Date