

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000389136

**Entity Name:** CALL ON DUTY POOL SERVICE LLC

**Current Principal Place of Business:**

347 SE 19TH TERRACE  
HOMESTEAD, FL 33033

**Current Mailing Address:**

347 SE 19TH TERRACE  
HOMESTEAD, FL 33033 US

**FEI Number:** 85-4238179

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

LLORET FRABOTTA, BEATRIZ MRS.  
347 SE 19TH TERRACE  
HOMESTEAD, FL 33033 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

**Authorized Person(s) Detail :**

Title MGR  
Name LLORET FRABOTTA, BEATRIZ MRS.  
Address 347 SE 19TH TERRACE  
City-State-Zip: HOMESTEAD FL 33033

Title AP  
Name FRABOTTA, ROBERTO MR.  
Address 347 SE 19TH TERRACE  
City-State-Zip: HOMESTEAD FL 33033

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** BEATRIZ LLORET FRABOTTA

MGR

04/27/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date