

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 25, 2004 8:00 am
Secretary of State

02-25-2004 90037 041 ***150.00

DOCUMENT # 227442

1. Entity Name

SOUTH MIAMI POOL COMPANY



Principal Place of Business

8757 NW 140 LANE
MIAMI LAKES FL 33018
US

Mailing Address

8757 NW 140 LANE
MIAMI LAKES FL 33018
US

2. Principal Place of Business

2457 West 80st

3. Mailing Address

same

Suite, Apt. #, etc.

Bay 6

Suite, Apt. #, etc.

City & State

HPaleah FL

City & State

Zip

33016

Country

USA

Zip

Country

4. FEI Number

59-0880649

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

MOORE

CR2E034 (11/03)



6. Name and Address of Current Registered Agent

**LAMBERT, ALAIN E
8757 NW 140 LANE
MIAMI LAKES FL 33018**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PT ☒ Delete
NAME LAMBERT, ELOY
STREET ADDRESS 8757 NW 140 LANE
CITY-ST-ZIP MIAMI LAKES FL 33018

TITLE VPS ☐ Delete
NAME LAMBERT, ALAIN E
STREET ADDRESS 8757 NW 140 LANE
CITY-ST-ZIP MIAMI LAKES FL 33018

TITLE DC ☐ Delete
NAME OISTER, JR., WILLIAM P.
STREET ADDRESS 10000 SW 100 ST
CITY-ST-ZIP MIAMI FL 33176

TITLE T ☒ Delete
NAME LAMBERT, ELOY
STREET ADDRESS 8757 NW 140 LANE
CITY-ST-ZIP MIAMI LAKES FL 33018

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE President ☒ Change ☐ Addition
NAME ALAIN E. Lambert
STREET ADDRESS 8757 NW 140 LN
CITY-ST-ZIP MIAMI LAKE FL 33018

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Alain Lambert 2/20/04(305)-826-3560

Date

Daytime Phone #