2006 FOR PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

SIGNATURE:

FILED Apr 24, 2006 08:00 AM Secretary of State

Caytime Phone #

ANNUAL KEPOKI	Socretory of State
DOCUMENT # 252389 1. Enlity Name SPARKLING POOLS INC	Secretary of State
Principal Place of Business Mailing Address 12530 N. KENDALL DRIVE 12530 N. KENDALL DRIVE SOUTH MIAMI, FL 33186-1817 SOUTH MIAMI, FL 33186-18	. 18 6 10 TO THE PROPERTY OF T
DO NOT WRITE IN THIS SPA	D42D2006 No Chg-P CR2E034 (11/05) 4. FEI Number
SPIEGEL, ROBERT 12530 N. KENDALL DR. MIAMI, FL 33186	DO NOT WRITE IN THIS SPACE
The above named entity submits this statement for the purpose of changing its register the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (MOTE Register FILE NOWILL FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution	red Agent alignature required when reinstaling) DATE ancing\$5.00 May Be
10. OFFICERS AND DIRECTORS TITLE SPIEGEL, ROBERT STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME NAME NAME NAME	000000528291 05/05/06-80032-002 150.00 DO NOT WRITE IN THIS SPACE
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12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 cells; that I am an officer or director of the corporation or the receiver or trusted 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR