FILED

2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

Jun 02, 2003 8:00 am **Secretary of State** F23759 **DOCUMENT #** 06-02-2003 90199 040 ***150.00 1. Entity Name AQUAMARCITE CO. Principal Place of Business Mailing Address 977 NW 79TH TERR., PLANTATION, FL 33324 977 NW 79TH TERR., PLANTATION, FL 33324 P O BOX 16313 P O BOX 16313 PLANTATION FL 33318 PLANTATION FL 33318 2. Principal Place of Business 9/11/w 85 Ten A CHECK HERE IF MAKING CHANGES 4. FEI Number Applied For 59-2073773 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent STEVENS, WESLEY E. Street Address PLANTATION FL 33324 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 ag 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 \$5.00 May Be 9. Election Campaign Financing After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE PDS TITLE Delete Addition NAME STEVENS, WESLEY E. NAME 977 N.W. 79TH TERRACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PLANTATION FL CITY-ST-ZIP Presiden TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition NAME BERT DIGINSAMO STREET ADDRESS STREET ADDRESS 28 old Pounta, manon #123 CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREFT ADDRESS STREFT ADDRESS CITY-ST-ZIE 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 of Block 11 if changed, or on an attachment with an address, with all officer were propertied.

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

TITLE

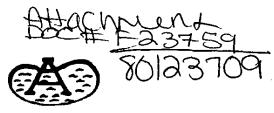
NAME

STREET ADDRESS

☐ Delete

Change

☐ Addition



Alpha Pool & Marcite Co.

P.O. Box 16313, Plantation, FL 33318 Phone: (954) 452-0088

May 30, 2003

To Whom It May Concern:

I had purchased this company a few months back but the prior owner did not forward UNIFORM BUSINESS REPORT to me until-recently. I spoke to a woman in your office today and explained my situation. She said make the necessary changes and mail it in with the original \$150.00 fee which is enclosed.

If there are any problems or questions the best way to reach me is my cell phone at 954/448-0034. I'm not in the office that often and this is the best way to reach me.

Thank you for your help with this matter.

Sincerely,

Michael Phillips