19800003801

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: Pool Products 5:5000t

(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the followi 50002579385
-07/02/9801078001 *****78.75 *****78.75
(Name of Person)
Pool Products Discount
(Firm/Company)
9290 SW 1st St.
(Address)
Plantation, FL 33324
(City/State/Zin)

Should you need to call someone concerning this matter, please call:

(Name of Person) at (954) 270-8696 (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399

MAILING ADDRESS:

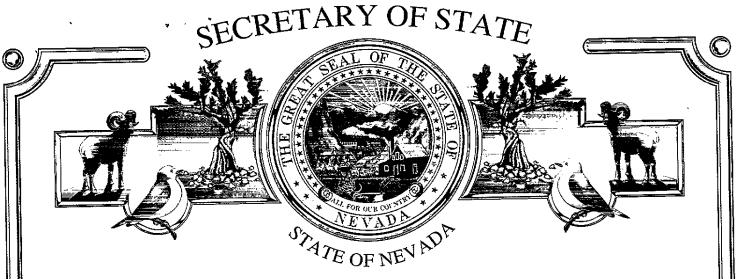
Qualification/Tax Lien Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 SECRETARY OF STATE
DIVISION OF CORPORATIONS

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.) (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Office Address: __, Florida, <u>33</u>0 10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address UNLY - P.O. Box NOT acceptable)
A. DIRECTORS (Street address only - P.O. Box NOT acceptable)
Chairman: Chery Jakryk
Address: 9290 Sw Tot Street
Datation, FL 33324
Vice Chairman: Frank Carmona
on con Dounes Blild
Address: 200 800 00148300 01000 01000 01000 01000 01000 01000 01000 01000 01000 01000 01000 01000 01000 01000 01000 01000 010000 010000 010000 010000 01000 01000 01000 01000 01000 01000 01000 01000 01000 010000 01000 01000 01000 01000 01000 01000 01000 01000 01000 01000 010000 010000 010000 0100000 010000
Director: Chery Bakryk
Address: 9290 500 192 5theel
Plantation, PL 33324
Director:
Address:
B. OFFICERS (Street address only - P.O. Box NOT acceptable)
President: Sakryk
Address: 9290 sw 1st street
Plantation, FL 33324
Vice President: Frank Carmona
Address: 230 000 Airoso Blod.
Pt. St. Lucie, FL 34983
$\bigcap_{i=1}^{n} \bigcap_{i=1}^{n} \bigcap_{i$
Secretary: 1 Mos y 3 2 Kg/k
Address: 9290 885 100 887
Martetion, the 35524
Treasurer. Track Carmona
Address: 230 500 Miroso Blud.
A. St. Lucie, FL 34983
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13 (hard Dalana)
(Signature of Chairman) Vice Chairman, or any officer listed in number 12 of the application)
14. Chery Sakryk trest dent-Co-Owner (Typed or printed name and capacity of person signing application)
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CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, limited-liability companies, limited partnerships, and limited-liability partnerships pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **POOL PRODUCTS DISCOUNT**, **INC**. as a corporation organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since May 7, 1998 and is in good standing in this state.

By

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on June 22, 1998.

Secretary_of)State

Certification Clerk

FILED SECRETARY OF STATE DIVISION OF CORPORATION