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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	MENT # G19 2	267 (5)				
Corporation OLYMF	n Name PIC POOL SERVICES CO	` '	•			
trincipal Place of Business Mailing Address					** 1941 91411 41411 61411 914)
1843 N.W. 29TH ST. 1843 N.W. 29TH S OAKLAND PARK FL 33311 OAKLAND PARK FL						
				3. Date Incorporated or Qualified 01/19/1983	3a. Date of Last 03/23/19	
Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number 59-2253454		Applied For Not Applicat
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired		5 Additional
City & State	9	City & State		6. Election Campaign Financing	\$5.0	Required May Be
Zip	Country	28 Zip	Country	Trust Fund Contribution 8. This corporation has liability for	Add Add	ed to Fees
	25	29	30	Florida Statutes Yes	s 🗌 No	5 199.032,
	9. Name and Address of Cu	Jrrent Hegistered Agent	81 Name	10. Name and Address of New I	Registered Agent	
KING. A	NTHONY					
	N 29 STREET		82 Street Add	dress (P.O. Box Number is Not Acceptal	ble)	
OAKLAN	ND PARK FL 33311		83			
			84 City		85 Z	'ıp Code
	to the provisions of Sections 607.6				FL " "	
O register	to the provisions of Sections 607.t ed agent, or both, in the State of th, and accept the obligations of	riorida. Such change was autric	orized by the corporation's boa	oration submits this statement for the pu ard of directors. I hereby accept the app	rpose of changing its pointment as registere	registered of d agent. I am
familiar wit	th, and accept the obligations of, the state of the obligations of, the state of th	Section 607.0505, Florida Statul	orized by the corporation's boa	ard of directors. I hereby accept the app	DATE	d agent. I am
familiar wit	Signature, typed or printed name of registered OFFICERS DP	Section 607.0505, Florida Statul	orized by the corporation's boates. (NOTE: Registered Agent signature require)	and of directors. Thereby accept the app	DATE	d agent. I am ORS IN 12
familiar wit	Signature, typed or printed name of registered OFFICERS DP KING, ANTHONY	Florida: Such change was author Section 607.0505, Florida Statul Tagon and tribut applicable & AND DIRECTORS	PNOTE: Registern Agint signature requirements 13. 1.1 TITLE 1.2 NAME	and of directors. Thereby accept the app	DATE FICERS AND DIRECTO	d agent. I am
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SIGNATURE:

SIGNATURE AND YPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ANTHONY V. KING, PRESIDENT 01/23/96

(954) 739-2407

Daytime Phone #

CR2E034 (12/95)