FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED May 21 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 1. Corporation Name G45526 (2) INTERNATIONAL POOL MANAGEMENT, INC. Principal Place of Business Mailing Address 4441 COLLINS AVE. 4441 COLLINS AVE. MIAMI BEACH FL 33140 MIAMI BEACH FL 33140 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/13/1983 2. Principal Place of Business 2a. Mailing Address Applied For 4525 collins 1005 Ne 59-2343594 Not Applicable Suite, Apt. #, etc. \$8.75 Additional \mathbf{Z} 5. Certificate of Status Desired Miami Shores Fl. Mirmi Bit Fee Required 6. Election Campaign Financing \$5.00 May Be Du de 33140 \Box 23 Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible Yes 30 25 Personal Property Tax due June 30. 24 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DONATO MASUCCI 1256 NE 92ND STREET 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33138 83 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE PSD Change Addition TITLE 1.1 TITLE KERR, MICHAEL NAME 1.2 NAME 1005 NE 92ND ST STREET ADDRESS 1.3 STREET ADDRESS **MIAMI SHORES FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE MASUCCI, DONATO NAME 22 NAME 1256 N.E. 92ND ST. STREET ADDRESS 2.3 STREET ADDRESS **MIAM! SHORES FL** CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY-ST-ZIP DELETE TITLE 4.1 BITLE Change Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-7IP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME

14. 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 annual report or supplemental arrival report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 12 or Block 13 if changed, or on an attagramment with an address.

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

5.4 CITY - ST - ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

Change

Addition