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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT # G58501

(9)

POOLS BY ANDREWS, INC.

Secretary of State

FILED

May 07 1998 8:00am

Principal Place 8300 RESOUP RIMERA BEAC	ICE DRIVE	Mailing Address 8300 RESOURCE DRIVE RIVIERA BEACH FL 334			DO NOT WRITE IN	
					3. Date Incorporated or Qualified 09/08/1983	
2. Principal Pl	ace of Business	2a. Mailing Address 26			4. FEI Number 59-2319596	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		1	\$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
Zip Country		28 Zip	Zip Country		Trust Fund Contribution 8. This corporation owes or has paid	Added to Fees
14	25 9. Name and Address of Current	29	30		Personal Property Tax due June 30	o. 🔀 Yes 🗌 No
ANI		r veðisteten víðatit	81	Name	10. Name and Address of New Regis	stered Agent
ANDREWS, EDWARD W. 8300 RESOURCE DRIVE			82		ress (P.O. Box Number is Not Acceptable)	
	IERA BEACH FL 33404				Tess (F.O. Box Number is Not Acceptable,	,
			83	•		
			84	City		FL 85 Zip Code
	o the provisions of Sections 607.0502 splistered agent, or both, in the State in familiar with, and accept the obliga	Pand 607.1508, Florida Statu of Florida Such change was Illions of, Section 607.0505, F	ites, the above authorized b lorida Statute	ve-named corp by the corpora as:	poration submits this statement for the pur tion's board of directors. I hereby accept t	pose of changing its registered the appointment as registered
SIGNATURE	Signature, typed or ponted hame of registered ager	ON) elds steps it effit bee ti	TE Registered Ag	jent signaturo requi	red when reinstating)	DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
TITLE	ANDDENIO EDUIADO MI	☐ DELETE	1.1 TITLE			Change Addition
NAME	Andrews, Edward W. 8300 Resource Dr.		1.2 NAME	ſ		
STREET ADDRESS	RIVIERA BEACH FL			T ADDRESS		:
CITY-ST-ZIP TITLE		DELETE	1.4 CITY- 2.1 TITLE	51-211		Change Addition
NAME		_	2.2 NAME			- • -
STREET ADDRESS			2.3 STREE	T ADDRESS		
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP		
TITLE		DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS				1 ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. CITY - 4.1 TITLE	ST-ZIP		Change Addition
NAME		_ occen	4.1 IIICE			C Change C Appellon
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY -	1		
TITLE		DELETE	5.1 TITLE			. Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREE	T ADDRESS		
CITY-ST-ZIP			5.4 CITY -	ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE			Change Addition
NAME			62 NAME			
STREET ADDRESS			6.3 STREE	T ADDRESS		
CITY-ST-7/P			SACITY-	S1.7iP		

14. Thereby 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 annual 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 received 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 attachment with an address.

SIGNATURE:

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一日 地名日本 優先日本

President

4-24-98

(561/625-5600