

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G69642

Entity Name: POOL FACT, INC.

FILED  
Mar 24, 2005  
Secretary of State

**Current Principal Place of Business:**

ONE OAKWOOD BLVD.  
SUITE 265  
HOLLYWOOD, FL 33020

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 816639  
HOLLYWOOD, FL 33081

**New Mailing Address:**

FEI Number: 59-2334596

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FACTOR, MICHAEL  
ONE OAKWOOD BLVD.  
SUITE 265  
HOLLYWOOD, FL 33020 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: FACTOR, MICHAEL M.,  
Address: 1798 ESPANOLA DR  
City-St-Zip: COCONUT GROVE, FL 33133

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL M FACTOR

P

03/24/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date