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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DOCUMENT # K28495 (5) 1. Corporation Name SAFRAN POOLS, INC.												
Principal Place	of Business		h	Mailing Address			······································					
Principal Place of Business 360 N. S. R. 434 ALTAMONTE SPRINGS FL 32714			ľ	360 N. S. R. 434 ALTAMONTE SPRINGS FL 32714								
								3. Date Incorporated or 07/15/1988	r Oualified	3a. D	ate of Last F 10/16/1	
2. Principal Place of Business 1 Suite, Apt. #, etc. 2 City & State 3				2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State				4. FEI Number 59-2952692			Applied For Not Applicable	
			27				5. Certificate of Status I	Desired		\$8.7	\$8.75 Additional Fee Required	
											\$5.0	55.00 May Be Added to Fees
Zip		Country 25		Zip	30	intry		This corporation has liability for intangible Florida Statutes Yes No				
		and Address of Cur	29 rent Regi	stered Agent	1001			10. Name and Address			d Agent	
						81	Name				- 	
	AN, FRED					82	Street Addr	ress (P.O. Box Number is No	t Acceptab	ole)		
360 N.S.R. 434 Altamonte springs fl 32714						83				······································		
ALIAM	UNIE SPA	INGS PL 327 14				83						
						84					85 Z	p Code
44 D	M 7.2.						City		·	F		
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