Feb 18, 1999 8:00 am Secretary of State

02-18-1999 90115 022 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

•	199 9		DIVISION OF CO	RPORATI	ONS	02-18-	1999 90115 02	2 ***150.0	00
1. Corporation	MENT # K88 NAME OOL & PATIO, INC.	379							
Principal Place	of Business	Mailing	Address		•	\$	8 8 14 114 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	. MIS MIKIT MINIT KI	Eli estit ieen
7820 NW 54TH COURT 7820 NW 54TH COURT									
LAUDERHILLS FL 33351 LAUDERHILLS FL 33351						DO N	OT WRITE IN THIS	SPACE	
						3. Date Incorporated or 0		OI NOL	
						05/16/1989			
2. Principal Pi	ace of Business	2a. Ma	ling Address			4. FEI Number		· Apr	lied For
21		26				65-0137310			Applicable
Suite, Apt.	#, etc.	Sui	e, Apt. #, etc.			5. Certificate of Status D	esired	\$8.75 A	- (
22		27						Fee Rec	
City & State	е	—	/ & State			Election Campaign Fit Trust Fund Contribution		\$5.00 N Added to	
Zip	Country			Country	·····	~			71003
- '	Country Zip C 25 29 30			_ `		8. This corporation owes the current year Intangible Personal Property Tax. Yes No			
24	9. Name and Address					10. Name and Address		Agent	
				81	Name				
FONDA, RONALD J.					Street A	ddress (P.O. Box Number is No	Acceptable)		
7820 NW 54TH COURT									
LAUL	DERHILLS FL 33351			83					
					City			85 Zip C	ode
					<u> </u>		FL	shanaina ita	registered :
office or re	to the provisions of Sections egistered agent, or both, in m familiar with, and accept	the State of Florida. S	uch change was auti	ionzed by	the corpor	orporation submits this statement ation's board of directors. I here	by accept the appoi	ntment as reg	jistered
SIGNATURE				:-4		uired when reinstating)	DATE		
Signature, typed or printed name of registered agent and title if applicable. (NO 12. OFFICERS AND DIRECTORS				13.	it signatura rac	ADDITIONS/CHANGE:		ID DIRECTOR	RS IN 12
TITLE	PD	<u> </u>	DELETE	1.1 TITLE				☐ Change	☐ Addition
NAME	FONDA, RONALD J.			1.2 NAME		•			İ
STREET ADDRESS	7820 N.W. 54TH COU	RT		1.3 STREE	T ADDRESS				
CITY-ST-ZIP	LAUDERHILL FL		_	1.4 CITY-S	T-ZIP				
TITLE			□ DELETE	2.1 TITLE				Change	Addition
NAME				2.2 NAME		•			
STREET ADDRESS					T ADDRESS				
CITY-ST-ZIP			☐ DELETE	2. 4 CITY-5	ST-ZIP			☐ Change	Addition
TITLE			□ pere⊥e	3.1 TITLE 3.2 NAME					
NAME				4	T ADDRESS				
STREET ADDRESS				3.4. CITY-8	- 1				
CITY-ST-ZIP TITLE		_	☐ DELETE	4.1 TITLE	,,,,,,,,	<u> </u>		Change	☐ Addition
NAME				4. 2 NAME					
STREET ADDRESS				4.3 STREE	TADDRESS				,
CITY-ST-ZIP				4.4 CITY-S	T-ZIP				■ A d dtst = :
TITLE			☐ DELETE	5.1 TITLE	1	•	•	☐ Change	☐ Addition
NAME				5.2 NAME			•		
STREET ADDRESS					T ADDRESS				
CITY-ST-ZIP			☐ DELETE	5.4 CITY-S 6.1 TITLE	i1-ZIP			☐ Change	Addition
TITLE			- OELETE	62 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 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 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 attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

RED