

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 24, 2002 8:00 am**  
**Secretary of State**

05-24-2002 91351 004 \*\*\*150.00

**DOCUMENT #** K88379

**1. Entity Name**

TIDAL POOL & PATIO, INC.

**DO NOT WRITE IN THIS SPACE**

**2. Principal Place of Business**

5404 N.W. 49th Way

Suite, Apt. #, etc.

**3. Mailing Address**

5404 N.W. 49th Way

Suite, Apt. #, etc.

City & State  
Talamac, FL

City & State  
Tamarac, FL

Zip  
33319

Country  
USA

Zip  
33319

Country  
USA

**4. FEI Number**  
65-0137310

Applied For  
Not Applicable

**5. Certificate of Status Desired** ☐

**\$8.75 Additional  
Fee Required**

DO NOT WRITE IN THIS SPACE

**7. Name and Address of Current Registered Agent**

Name **FONDA, RONALD J.**

Street Address (P.O. Box Number is Not Acceptable)  
5404 N.W. 49th Way

City **Tamarac**

FL

Zip Code  
33319

**DO NOT WRITE  
IN THIS SPACE**

**8. 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** \*

*R J Fonda*

(NOTE: Registered Agent signature required when resigning)

\* *4/30/02*

DATE

**9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.**  
(See criteria on back) ☐

**January 1 - May 1 Fee is \$150.00  
After May 1 Fee is \$550.00  
Amended UBR is \$61.25**

**Make Check Payable to Department of State**

**10. Election Campaign Financing  
Trust Fund Contribution.** ☐

**\$5.00 May Be  
Added to Fees**

**11. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
FD  
FONDA, RONALD J.  
5404 N.W. 49th Way  
Tamarac, FL 33319

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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**DO NOT WRITE  
IN THIS SPACE**

**13. 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered.**

**SIGNATURE: \***

*R J Fonda*

04/30/02 954-748-3461

Date

Telephone Number

CR2E034B (12/01)