


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 17, 2008 8:00 am
Secretary of State

04-17-2008 90173 025 ***138.75

DOCUMENT # L04000032801	
1. Entity Name AMBIANCE CUSTOM POOLS LLC	

Principal Place of Business 1502 SW MERCEDES AVE PORT ST LUCIE, FL 34953	Mailing Address 2800 E COMMERCIAL BLVD STE 208 FT. LAUDERDALE, FL 33308
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	13900 S. JOG ROAD
City & State	# 203-276 DELRAY BEACH, FL 33446 USA
Zip	Country

03042008 Chg-LLC CR2E083 (12/06)

4. FEI Number 27-0089877	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent	
KATZ, ALLEN H 2800 E COMMERCIAL BLVD STE 208 STE 208 FT. LAUDERDALE, FL 33308	

New Address →

7. Name and Address of New Registered Agent	
Name ALLEN H KTAZ, P.A.	
St 13900 S. JOG ROAD	
City # 203-376 DELRAY BEACH	33446
Zip Code	


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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BIFULCO, JERRY 1502 SW MERCEDES AVE PORT ST LUCIE, FL 34953 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: 	JERRY BIFULCO	Date: 4/1/08	Daytime Phone #: 772-344-3906
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