## 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# L14230

Entity Name: KRISTAL BLUE POOL COMPANY OF MIAMI

FILED Oct 19, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Finicipal Flace of Dusiness.	New Fillicipal Flace of Dusiliess.

20335 S.W. 79 COURT 7938 SW 195 TERRACE MIAMI, FL 33189 US CUTLER BAY, FL 33157 US

Current Mailing Address: New Mailing Address:

20335 S.W. 79 COURT 7938 SW 195 TERRACE MIAMI, FL 33189 US CUTLER BAY, FL 33157 US

FEI Number: 65-0145026 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CASTILLO, NELSON DAVID
20335 SW 79 CT
MIAMI, FL 33189 US

CASTILLO, NELSON DAVID
20335 SW 79 COURT
MIAMI, FL 33189 US

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: NELSON DAVID CASTILLO 10/19/2007

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

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

Title: PD () Delete Title: () Change () Addition

 Name:
 CASTILLO, NELSON D
 Name:

 Address:
 20335 S.W. 79 COURT
 Address:

 City-St-Zip:
 MIAMI, FL 33189 US
 City-St-Zip:

Title: STD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 CASTILLO, MADELEINE
 Name:

 Address:
 20335 S.W. 79 COURT
 Address:

 City-St-Zip:
 MIAMI, FL 33189 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: NELSON DAVID CASTILLO PD 10/19/2007