

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# L27283

FILED
Jul 16, 2008
Secretary of State**Entity Name:** POOL & SPA PERFECT, INC.**Current Principal Place of Business:**715 12TH ST
VERO BEACH, FL 32960**New Principal Place of Business:****Current Mailing Address:**715 12TH ST
VERO BEACH, FL 32960 US**New Mailing Address:****FEI Number:** 59-2980127 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**MAKIELSKI, WILLIAM
715 12TH ST
VERO BEACH, FL 32960 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PD () Delete
Name: MAKIELSKI, WILLIAM,
Address: 2255-69TH CT SW
City-St-Zip: VERO BEACH, FL 32968**Title:** VST () Delete
Name: MAKIELSKI, DENISE,
Address: 2255-69TH CT SW
City-St-Zip: VERO BEACH, FL 32968**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PDT (X) Change () Addition
Name: MAKIELSKI, WILLIAM,
Address: 2255-69TH CT SW
City-St-Zip: VERO BEACH, FL 32968**Title:** VS (X) Change () Addition
Name: MAKIELSKI, DENISE,
Address: 2255-69TH CT SW
City-St-Zip: VERO BEACH, FL 32968

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: WILLIAM MAKIELSKI

MR.

07/16/2008

Electronic Signature of Signing Officer or Director

Date