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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

- Secretary of State
- DIVISION OF CORPORATIONS

FILED Jan 29, 1999 8:00am **Secretary of State**

01-29-1999 90011 009 ***150.00

DOCU	IMENT # L73685				
	CONCRETE POOLS, INC.				
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	·				
Principal Pla	ce of Business	Mailing Address		F 100 101 411 16000 17110 6110 1010 3171 010	il ments Blött nigté Albit Alget 1861
410 SAEGER		410 SAEGER AVENUE			4
FORT PIERCE US	FL 34982	FORT PIERCE FL 34982 US		DO NOT WRITE IN TH	IS SPACE
		00		3. Date Incorporated or Qualifed	
				05/14/1990	***
2. Principal I	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	4	26		65-0192070	Not Applicable
Suite, Apt	. #, 8lC.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional
City & Sta	ite	City & State		6 Floation Compaign Financian	Fee Required
23		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year I	
24	25	29	30	Personal Property Tax.	X Yes □ No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registere	d Agent
ΔH	EN, ARTHUR HAMILTON		81 Name		•
A & 410	SAEGER AVENUE		82 Street Ad	dress (P.O. Box Number is Not Acceptable)	11 1 2 2 4 Thinks
	RT PIERCE FL 34982		83	150 3. 4. 4. 6. 6. 7. 7. 7. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	Cartic et al Sign State State (Mar
			65		
			84 City	a komo na konstanta pengantipakan district	85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statul	tes, the above-named co	rporation submits this statement for the purpose	of changing its registered
Office or	registered agent, or both, in the State of am familiar with, and accept the obligation	Florida Such change was a	withorized by the corners	ation's board of directors. I hereby accept the app	ointment as registered
SIGNATURE		,			
	. Signature, typed or printed name of registered agent a		Registered Agent signature requ		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	
NAME:	PVST ALLEN, ARTHUR H.	DELETE	1.1 TITLE	65 TYMB	
STREET ADDRESS			4.0.1141.05	2.4.6	☐ Change ☐ Addition
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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.

6.4 CITY-ST-ZIP