## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

SIGNATURE: Y

M00680

(2)

A.C. POOLS CONTRACTING CORPORATION

A.C. 1 GOLO GOMMACINA GOM CHAMON										
Principal Place of Business			Mailing Address					1 <b>40</b> 11 <b>0</b> 141 01	111 WF011 W161	E 84861 81811 3001
9035 S.W. 21ST TERRACE 9035 S.W. 21ST TERRACE MIAMI FL 33165 MIAMI FL 33165										
						3. Date incorporated or Gualified   3a. Date of Last Report   05/15/1984   03/14/1995				
2. Principal Plac	ce of Business	2ε	i. Mailing Address				4. FEI Number			Applied For
1		26					59-2408554			Not Applicable
Suite, Apt. #.	, etc.	27	Surte, Apt. #, etc.				5. Certificate of Status Desired		Fee	Additional Required
City & State		28	City & State				Election Campaign Financing     Trust Fund Contribution			<b>0</b> May Be d to Fees
Zip	Country	- 28	L	Cou	ntry			intangible t	ax under s	
14	25	29		30	,			□No		
<u>`</u>	9. Name and Address of Curren	t Flegi	stered Agent			,	10. Name and Address of New I	Registered	Agent	
				·	81	Name				
CASTELL	LANOS, ALEJANDRO			i	82	Street Add	ress (P.O. Box Number is Not Acceptate	ole)		<del></del>
9035 S.V	V. 21ST TERRACE									
miami fi	L 33165				83					
					84	City			85 2	p Code
					l	ļ <u>.</u>	ration submits this statement for the pu	FL	<u>-                                    </u>	
SIGNATURE	Signature, typed or printed name of registered age: 1 OFFICERS AN:			NE Registions	Ι <b>Α</b> , <b>μ</b> «	nt superture respec-	et when resistating.  ADDITIONS/CHANGES TO OFF	CIATE	D DIRECTO	ORS IN 12
1111.6	PT		DELETE	1 1 1	HUF				☐ Change	☐ Addition
NAME	CASTELLANOS, ALEJANDRO	)		12N	AME					
STREET ADDRESS	9035 SW 21 TERR			1.3 \$	TREE	T ADDRESS				
CITY - ST - ZIP	MIAMI FL			14C	ijγ.:	ST-ZIP				
TITLE	VS		DELFTE	2 1 7	IIIE				Change	☐ Addition
NAME	CASTELLANOS, MARCIA			22N						
STREET ADDRESS	9035 SW 21 TERR					LADDRESS				
CITY-ST-ZIP	MIAMI FL		□ DELETE			\$1 - 7iP			Change	Addition
TITLE			L ottett	3 1 7 3 2 N					☐ Griange	L. Koakean
NAME CERCET ADDRESS						LADDRESS				
STREET ADDRESS  CITY-ST-ZIP						SI-7IP				
THILE			DELETE	4 11					Change	Add tion
NAME				42 N	AME					
STREET ADDRESS				4 3 S	TREE	r Address				
CITY - ST - ZIP				440	ΊŢ.	ST-ZIF				
TITLE			☐ DELETE	5.11	TETLE				Change	- Addition
NAME				5 2 N	IAM-					
STREET ADDRESS						1 ADDRESS				
CITY-ST-ZIP			□ NU CTC			ST - ZIP			[ Change	Addition
TITLE			☐ DELFTE	6.1					change	L.J Addition
NAME STOCKE ADDRESS				62 N		T ADDRESS				
STREET ADDRESS										
City-St-ZiP	v certify that the information set olied	with th	is filma is coluntariiv fu	roished and	do	ST-ZIP   es not qualify	for the exemption stated in Section 119	9.07(3)(k), F	lorida Stati	utes I further
14. I do hereby certify that oath; that	the information indicated on the aun	Jal rep Yation	ort 🗗 surfolemiental ar	irnished and inual report tee empowe	do:	es not qualify ue and accur	for the examption stated in Section 11: ate and that my signature shall have th its report as required by Chapter 607, I	e same leg	ai effect as	ir made ui