

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M19663

FILED  
Apr 09, 2010  
Secretary of State

**Entity Name:** PATIO AND POOL SCREENING SERVICES, CORP.

**Current Principal Place of Business:**

27205 JACKS BRANCH RD. SW  
LABELLE, FL 33935 US

**New Principal Place of Business:**

**Current Mailing Address:**

27205 JACKS BRANCH RD SW  
LABELLE, FL 33935 US

**New Mailing Address:**

27205 JACKS BRANCH RD. SW  
LABELLE, FL 33935 US

**FEI Number:** 59-2578890

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MAESTRE, JOSE, I  
27205 JACKS BRANCH RD. SW  
LABELLE, FL 33935 US

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

MAESTRE, JOSE I DS  
27205 JACKS BRANCH RD. SW  
LABELLE, FL 33935 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:** JOSE I MAESTRE

04/09/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** DS  
**Name:** MAESTRE, JOSE, I  
**Address:** 27205 JACKS BRANCH RD. SW  
**City-St-Zip:** LABELLE, FL 33935

**Title:** D  
**Name:** MAESTRE, ELSY  
**Address:** 27205 JACKS BRANCH RD. SW  
**City-St-Zip:** LABELLE, FL 33935

I hereby 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 all other like empowered.

**SIGNATURE:** JOSE I MAESTRE

DS

04/09/2010

Electronic Signature of Signing Officer or Director

Date