2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# M34252

Entity Name: FLORIDA SUNSHINE POOLS, INC.

FILED Feb 18, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 1230 5722 S. FLAMINGO ROAD

PALM CITY, FL 34991 US #271

FT. LAUDERDALE, FL 33330 US

Current Mailing Address: New Mailing Address:

P.O. BOX 1230 P.O. BOX 456

PALM CITY, FL 34991 US BOCA RATON, FL 34429 US

FEI Number: 59-2752120 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:

LANDELL, DONNA ASHKINAZY, ALAN C 2285 SW DOVER CANYON WAY 5722 S. FLAMINGO ROAD

PALM CITY, FL 34990 #

FT. LAUDERDALE, FL 33330 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: ALAN CRAIG ASHKINAZY 02/18/2003

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

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

Title: DP () Delete Title: DP (X) Change () Addition

 Name:
 LANDELL, DAVID,
 Name:
 ASHKINAZY, ALAN C DP

 Address:
 2285 SW DOVE CANYON WAY
 Address:
 5722 S. FLAMINGO ROAD # 271

 City-St-Zip:
 PALM CITY, FL 34990
 City-St-Zip:
 FT. LAUDERDALE, FL 33330 US

 Name:
 LANDELL, DONNA,
 Name:
 LANDELL, DAVID M

 Address:
 2285 SW DOVE CANYON WAY
 Address:
 2285 SW DOVE CANYON WAY

Address: 2285 SW DOVE CANYON WAY Address: 2285 SW DOVE CANYON W
City-St-Zip: PALM CITY, FL 34990 City-St-Zip: PALM CITY, FL 34990

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ALAN C. ASHKINAZY DP 02/18/2003