I COF ANNU	PROFIT PPORATION JAL REPORT 1998	FLO	RIDA DEPAR Sandra B.	TMENT OF . Mortham y of State	STATE	F May 04 Secret		8:	
	MENT # M44 Name C SPA 'N POOL, INC.	916	(8)						
Principal Place of Business Mailing Address 7801 SW 63 COURT 7601 SW 63 COURT SOUTH MIANI FL 33143 SOUTH MIANI FL 33143						DO NOT WRITE IN THIS SPACE			
						 Date Incorporated or Qualifie 01/16/1987 	ю		
Principal P	lace of Business	2a, Mailing A	ddress			4. FEI Number			plied For
Suite, Apt.	#, etc	26 Suite, Ap	t. #, etc.			59-2807461 5. Certificate of Status Desired			t Applicable Additional
City & State	6	27 City & Sti	ate			 Certificate of Status Desired Election Campaign Financing 		Fee Re \$5.00	· · ·
		28	r	0		Trust Fund Contribution		Added	to Fees
Zip	Country 26	Zip 29		Country 30	/	 This corporation owes or has Personal Property Tax due J 	· _	· _	angible] No
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	9. Name and Address of C	urrent Registered Age	nt	81	Name	10. Name and Address of New	Registered Age	nt	
	ANCK, GEORGE D 01 SW 63 COURT			82		ress (P.O. Box Number is Not Accept			
	OUTH MIAMI FL 33143			83					
				84		· · · · ·			0.4
•		-					FL		Code
office or re agent. I a	registered agent, or both, in the im familiar with, and accept the	State of Florida. Such c obligations of, Section (	hange was a 307.0505, Flo	uthorized by rida Statute	y the corpora s.	coration submits this statement for the tion's board of directors. I hereby ac	cept the appoint	ment as	registered
CONTRACTOR DE LA CONTRA									
2.	Signature, typed or printed name of registe OFFICER	red agrint and tille it applicable IS AND DIRECTORS	(NOTE	Registered Ag	eni signalure requi	red when remetating) ADDITIONS/CHANGES TO OF	DATE	RECTOR	 IS IN 12
LE	OFFICER	S AND DIRECTORS	(NOTE DELETE	<b>13.</b> 1.1 TITLE	eni signalure requi	red when reinstating}	DATE FICERS AND DI	RECTOR Change	
e. Le Me	OFFICER	S AND DIRECTORS		13. 1.1 TITLE 1.2 NAME	eni signature requi	red when reinstating}	DATE FICERS AND DI		IS IN 12
R. LE ME REET ADDRESS Y - ST - ZIP	OFFICER P PLANCK, GEORGE D.	S AND DIRECTORS	) DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-5	ADDRESS	red when reinstating}	DATE	Change	Addition
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