2004 FOR PROFIT CORPORATION

ANNUAL REPORT **DOCUMENT # P00000002946** 1. Entity Name FLORIDA PRIDE DECK & POOL MODELING, INC. Principal Place of Business Mailing Address 2522 NORTH SR 7 2522 NORTH SR 7 MARGATE, FL 33063 MARGATE, FL 33063

FILED Apr 26, 2004 08:00 AM **Secretary of State**



DO NOT WRITE IN THIS SPACE

04212004 No Chg-P CR2E034 (10/03) Applied For 4. FEI Number 65-0970228 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PAPPALARDO, JOSEPH A

DO NOT WRITE

2522 N STATE ROAD 7 MARGATE, FL 33063			IN THIS SPACE			
8. The above the obligat	named entity submits this statement for the poors of registered agent.	outpose of changing its registered of	ice or r	registered agent, or both,	in the State of Florida. I a	m familiar with, and acce
SIGNATURE.	Signature, typed or printed name of registered agent and title	If applicable. (NOTE Registered Agen	t signature	e required when reinstating)	DATE	<u>. </u>
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees		
10. TITLE NAME	OFFICERS AND DIRECT DISEASE OF SELBY, DAVID	CTORS			U00000129314	
STREET ADDRESS CITY-ST-ZIP	2500 CORAL SPRINGS DR CORAL SPRINGS, FL 33065			Q4	U00000129314 1/26/04-80072-0	017 150.00
TITLE NAME STREET ADDRESS CITY-ST-7/P						
TITLE NAME		<u> </u>				
STREET ADDRESS CITY-ST-ZIP TITLE	, s , s , s , s , s , s , s , s , s , s				NOT WRIT	
NAME STREET ADDRESS CITY-ST-ZIP				IN I	HIS SPAC	·
TITLE NAME STREET ADDRESS CITY-ST-ZIP				agas and management desired		
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	certify that the information supplied with this figure port is true; in this report or supplemental report is true; and the receiver of trustee emove the control of the receiver of the recei	ling does not qualify for the exemptic and accurate and that my signature to the execute this report as required by	n state		Florida Statutes I further of si finade under oath the	

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: