

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000026019

Entity Name: V. & Y. POOL SERVICE, INC.

FILED  
Mar 24, 2006  
Secretary of State

## Current Principal Place of Business:

4930 NW 190TH ST.  
CAROL CITY, FL 33055

## New Principal Place of Business:

717 PINE CONE LN  
NAPLES, FL 34104

## Current Mailing Address:

V & Y POOL SERVICE, INC.  
P.O. BOX 170265  
HIALEAH, FL 330170265

## New Mailing Address:

717 PINE CONE LN  
NAPLES, FL 34104

FEI Number: 65-0995335

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MOLINA, AARON E  
4930 N.W. 190TH STREET  
CAROL CITY, FL 33055 US

## Name and Address of New Registered Agent:

MOLINA, AARON E  
717 PINE CONE LN  
NAPLES-, FL 34104 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: AARON E. MOLINA

03/24/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MOLINA, AARON E  
Address: 4930 N.W 190TH ST.  
City-St-Zip: CAROL CITY, FL 33055

Title: VP ( ) Delete  
Name: MOLINA, RAMON V  
Address: 4930 NW 190TH ST.  
City-St-Zip: CAROL CITY, FL 33055

Title: ST ( ) Delete  
Name: MOLINA, VARLAM E  
Address: 8224 KEY ROYAL CR.  
City-St-Zip: NAPLES, FL 34119

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: MOLINA, AARON E  
Address: 717 PINE CONE LN  
City-St-Zip: NAPLES, FL 34104

Title: VP (X) Change ( ) Addition  
Name: MOLINA, RAMON V  
Address: 717 PINE CONE LN  
City-St-Zip: NAPLES, FL 34104

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: AARON E. MOLINA

PD

03/24/2006

Electronic Signature of Signing Officer or Director

Date