

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P00000033645

Entity Name: JAIME'S POOL SERVICE INC.

FILED
Dec 11, 2006
Secretary of State

Current Principal Place of Business:

2240 NW 137TH AVE.
SUNRISE, FL 33323

New Principal Place of Business:

Current Mailing Address:

PO BOX 450248
SUNRISE, FL 33345

New Mailing Address:

FEI Number: 65-0995432

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAPLAN, JAIME
2240 NW 137 AVENUE
SUNRISE, FL 33323 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KAPLAN, JAIME
Address: 2240 NW 137TH AVENUE
City-St-Zip: SUNRISE, FL 33323

Title: VPD (X) Delete
Name: KAPLAN, ERIKA
Address: 2240 NW 137TH AVENUE
City-St-Zip: SUNRISE, FL 33323

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: JAIME KAPLAN

PD

12/11/2006

Electronic Signature of Signing Officer or Director

Date