2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000069012

Entity Name: POOL ONE PLASTERING DIVISION, INC.

NORTH PORT, FL 34288 US

City-St-Zip:

FILED Jan 08, 2007 Secretary of State

Current P	rincipal Place	of Business:	New Principal Place o	New Principal Place of Business:	
SUITE D1-	JLSON DRIVE -D4 ARLOTTE, FL	33954			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
SUITE D1-	JLSON DRIVE -D4 ARLOTTE, FL	33954			
FEI Number: 65-1033383		FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
4192 SOU	NASKALE, AN TH SAN MATE ORT, FL 3428	O DRIVE			
	named entity see of Florida.	submits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Car	mpaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	NASKALE, CHR	AN MATEO DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	PEREIRA-NASK	Delete (ALE, ANGELA B AN MATEO DRIVE	Title: Name: Address:	() Change () Addition	

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: ANGELA B. PEREIRA-NASKALE VP 01/08/2007