

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000102120

1. Entity Name

ARIA'S POOL SERVICES, CORP.



Principal Place of Business

Mailing Address

17051 NE 35 AVE. #102
N MIAMI BEACH FL 33160

17051 NE 35 AVE. #102
N MIAMI BEACH FL 33160

2. Principal Place of Business

P.O. Box 601492

Suite, Apt. #, etc.

3. Mailing Address

PO BOX 601492

Suite, Apt. #, etc.

City & State

NORTH MIAMI BEACH FLORIDA

Zip

33160

Country

USA

City & State

NORTH MIAMI BEACH FLORIDA

Zip

33160

Country

USA

4. FEI Number

65-1051093

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GUILLERMO PRIETO, LUIS
17051 NE 35 AVE, #102
N MIAMI BEACH FL 33160

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.
(See criteria on back)

☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	P	☐ Delete
NAME	GUILLERMO PRIETO, LUIS	
STREET ADDRESS	17051 NE 35 AVE, #102	
CITY-ST-ZIP	N MIAMI BEACH FL 33160	
TITLE	V	☐ Delete
NAME	LUCIA PRIETO, OLGA	
STREET ADDRESS	17051 NE 35 AVE, #102	
CITY-ST-ZIP	N MIAMI BEACH FL 33160	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Guillermo Prieto, Luis

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-26-01 (305) 9495861

Date

Daytime Phone #

FILED
Jun 19, 2001 8:00 am
Secretary of State

05-10-2001 90165 025 ***158.75

7690



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)

MIAMI: JUNE 05-01.

Attachment Doc# P00000102120

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS.

7690

EN ATENCION A LA NOTA DE MAY 16-2001, REFERENCE NUMBER
~~P00000102120~~, REMITO A INTERES LA INFORMACION SOLI-
CITADA.

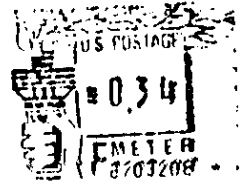
CORDIALMENTE,

Quirico A
ARMA POOL SERVICES CORP.
JES GUERRERO PRIETO

Attachment
7690
PP0000102120



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS
Corporate Records
P.O. Box 6327
Tallahassee, Florida 32314



An address change here changes your address on the FTD coupons only.

Attachment Doc# P00000102120 7690

Employer Identification Number (EIN)

OMB No. 1545-0257

65-1051093 261012 4 2



07

ARIAS POOL SERVICES CORP
% LUIS G PRIETO
17051 NE 35 AVE APT 102
N MIAMI BEACH FL 33160-3001

INTERNAL REVENUE SERVICE CENTER
ATLANTA, GA 39901

Send FTD Address Change and correspondence to the IRS address above.

TEAR OFF HERE
New Address _____
City _____
State _____ Zip _____
Telephone Number () _____
Do not write beyond this line