

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2003 8:00 am
Secretary of State

02-27-2003 90140 040 ***150.00

DOCUMENT # P00000116476



1. Entity Name
ALL SWIMMING POOL FINISHERS INC.

Principal Place of Business
13545 N W 9TH ST
PEMBROKE PINES FL 33028

Mailing Address
13545 N W 9TH ST
PEMBROKE PINES FL 33028



2. Principal Place of Business
2221 N.W. 72ND WAY
Suite, Apt. #, etc.

3. Mailing Address
2221 N.W. 72ND WAY
Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State
Pembroke Pines
FL
Zip
33024
Country
USA

City & State
Pembroke Pines FL
Zip
33024
Country
USA

4. FEI Number 65-1065357
Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HERNANDEZ, ANTONIO
13545 N W 9TH ST
PEMBROKE PINES FL 33028

2221 N.W. 72ND WAY
Pembroke Pines FL
33024

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME D
STREET ADDRESS HERNANDEZ, ANTONIO
CITY-ST-ZIP 13545 NW 9TH STREET
PEMBROKE PINES FL 33028 Delete

TITLE
NAME HERNANDEZ ANTONIO Change Addition
STREET ADDRESS 2221 N.W. 72ND WAY
CITY-ST-ZIP PEMBROKE PINES, FL 33024

TITLE
NAME VP
STREET ADDRESS HERNANDEZ, ENRIQUE
CITY-ST-ZIP 338 EAST 8TH ST
HIALEAH FL 33010 Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP Change Addition

TITLE
NAME S
STREET ADDRESS HERNANDEZ DAVID
CITY-ST-ZIP 18650 N W 9TH ST
MIAMI FL 33055 Delete

TITLE
NAME HERNANDEZ DAVID Change Addition
STREET ADDRESS 338 EAST 8TH ST
CITY-ST-ZIP Hialeah FL. 33010

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP Change Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 1/22/2003 904-889185
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)