2002 UNIFORM BUSINESS REPORT (UBR) **FILED** Mar 10, 2002 8:00 am Secretary of State P01000016062 DOCUMENT # 1. Entity Name A & G-OONCRETE POOLS OF MELBOURNE, INC. 01-16-2002 90038 048 ***150.00 Principal Place of Business Mailing Address 410 SEAGER AVE 410 SEAGER AVE FT PIERCE FL 34982 FT PIERCE FL 34982 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For Not Applicable Ζiρ Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ALLEN, ARTHUR H Street Address (P.O. Box Number is Not Acceptable) 410 SEAGER AVE FT PIERCE FL 34982 City Zip Code FI 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 FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) \Box Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. DP TITLE ☐ Delete TIT(F Addition allen, arthur h NAME NAME STREET ADDRESS 410 SEAGER AVE STREET ADDRESS CITY-ST-71P FT PIERCE FL 34982 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ACCRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS 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 Biock 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Oaytime Phone #



February 21, 2002

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Annual Corp. Report

A & G Concrete Pools of Melbourne

Document # P01000016062

This report was originally sent to you on January 8, 2002. It was returned to us because we did not have our EIN number. We did not get the check for 150.00 back. The check Number was 33036. Here is the corrected copy of the report. Please apply the payment you already received to this. Please call or write to the office listed below if there are any problems.

A & G Concrete Pools of Melbourne 410 Saeger Avenue Fort Pierce, FL 34982

Thank You,

Arthur H. Allen

President

President