

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 24, 2002 8:00 am
Secretary of State

05-24-2002 91315 043 ***150.00

DOCUMENT # P01000057741

1. Entity Name
ALPHA POOL & SPA INC.

Principal Place of Business
10328 BOCA ENTRADA BLVD. #224
BOCA RATON FL 33428

Mailing Address
10328 BOCA ENTRADA BLVD. #224
BOCA RATON FL 33428

2. Principal Place of Business
9691 Arbor Oaks ct.

Suite, Apt. #, etc.

305

City & State

Boca Raton, Florida

Zip

33428

Country

USA

3. Mailing Address

9691 Arbor Oaks ct.

Suite, Apt. #, etc.

305

City & State

Boca Raton, Florida

Zip

33428

Country

USA

4. FEI Number

65-111682

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

CORONA, MARITZA

~~269 N. UNIVERSITY DR.~~

~~SUITE J~~

~~PEMBROKE PINES FL 33024~~

Name

CORONA, MARITZA

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

269 N. UNIVERSITY DR.

SUITE K

City

PEMBROKE PINES

FL

Zip Code

33024

7. Name and Address of New Registered Agent

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 *Malcom O. Maritza Corona*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

04/28/02

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, 2002 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 **PD** ☐ Delete
NAME **HERRERA, LUIS**
STREET ADDRESS **10328 BOCA ENTRADA BLVD. #224**
CITY-ST-ZIP **BOCA RATON FL 33428**

TITLE **VPD** ☐ Delete
NAME **GOMEZ, ROSSANA**
STREET ADDRESS **10328 BOCA ENTRADA BLVD. #224**
CITY-ST-ZIP **BOCA RATON FL 33428**

TITLE **GM** ☒ Delete
NAME **URIA, JAVIER G**
STREET ADDRESS **10328 BOCA ENTRADA BLVD.**
CITY-ST-ZIP **BOCA RATON FL 33428**

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 **PD** ☒ Change ☐ Addition
NAME **HERRERA, Luis**
STREET ADDRESS **9691 Arbor Oaks ct #305**
CITY-ST-ZIP **Boca Raton, FL 33428**

TITLE **VPD** ☒ Change ☐ Addition
NAME **GOMEZ, ROSSANA**
STREET ADDRESS **9691 ARBOR OAKS CT. # 305**
CITY-ST-ZIP **BOCA RATON, FL 33428**

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: *Malcom O. Maritza Corona*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/28/02

Date

(561) 487 6373

Daytime Phone #

CR2E034 (9/01)