

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P01000404848

1. Entity Name
NORTH STAR POOL TECH, INC.



06 SEP 22 9:38

Principal Place of Business
430 D-E ANSIN BLVD.
HALLANDALE BEACH, FL 33009

Mailing Address
430 D-E ANSIN BLVD
HALLANDALE BEACH, FL 33009



2. Principal Place of Business
16117 123rd TERR N.
Suite, Apt. #, etc.

3. Mailing Address
16117 123rd TERR N.
Suite, Apt. #, etc.

REINSTATEMENT

00192008 REIN P 01-0580157 CR2E098 (11/05) 06

City & State
Mupiter, FL 33478
Zip 33478 Country Palm Beach

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Mupiter, FL 33478
Zip 33478 Country Palm Beach

01-0580157

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

HERNANDEZ, JORGE CARLOS
2503 25TH LANE
PALM BEACH GARDENS, FL 33418

7. Name and Address of New Registered Agent

Name Jorge Carlos Hernandez
Street Address (P.O. Box Number is Not Acceptable)
16117 123rd TERR N.
City Mupiter FL Zip Code 33478

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 *Jorge C Hernandez* 9-19-06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After January 1, 2007, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	HERNANDEZ, JORGE CARLOS	
STREET ADDRESS	2503 25TH LANE	
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418	
TITLE	VD	<input type="checkbox"/> Delete
NAME	HENSLEY, JOHN W	
STREET ADDRESS	2503 25TH LANE	
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418	
TITLE	TSD	<input type="checkbox"/> Delete
NAME	HERNANDEZ, IRENE	
STREET ADDRESS	2503 25TH LANE	
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jorge Carlos Hernandez	
STREET ADDRESS	16117 123rd TERR N.	
CITY-ST-ZIP	Mupiter, FL 33478	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	200080228062	
STREET ADDRESS	09/27/06--01053--009 **150.00	
CITY-ST-ZIP		
TITLE	TSD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Irene Hernandez	
STREET ADDRESS	16117 123rd TERR N.	
CITY-ST-ZIP	Mupiter FL 33478	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Steve Hernandez* 9-19-06 561-747-1380
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

@. Mitchell SEP 22 2006