

4/7/0

**FILED**  
**May 21, 2002 8:00 am**  
**Secretary of State**

04-07-2002 90572 016 \*\*\*150.00

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000112632

1. Entity Name

DOLPHIN AQUATIC SWIM SCHOOL, INC.

Principal Place of Business

139 NORTHWEST 93RD AVENUE  
 SUITE 203  
 PEMBROKE PINES FL 33024

Mailing Address

139 NORTHWEST 93RD AVENUE  
 SUITE 203  
 PEMBROKE PINES FL 33024

2. Principal Place of Business

3821 SW 160th Ave #103

Suite, Apt. #, etc.

103

3. Mailing Address

3821 SW 160th Ave #103

Suite, Apt. #, etc.

103

City &amp; State

Miramar, FL

City &amp; State

Miramar, FL

Zip

33027

Country

Zip

33027

Country

USA

4. FEI Number

65-1155558

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.  
 1840 SW 22ND ST.  
 4TH FLOOR  
 MIAMI FL 33145

7. Name and Address of New Registered Agent

Name

Edgardo A De Leon

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

3821 SW 160th Ave #103

Miramar

City

MIRAMAR

FL

Zip Code

33027

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

Edgardo A De Leon

Signature typed or printed name of registered agent and file 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, 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  
 NAME JIMENEZ, HILDA E ☒ Delete  
 STREET ADDRESS 139 NORTHWEST 93RD AVENUE  
 CITY-ST-ZIP PEMBROKE PINES FL 33024

TITLE SD  
 NAME DE LEON, EDGARDO A ☐ Delete  
 STREET ADDRESS 139 NORTHWEST 93RD AVENUE  
 CITY-ST-ZIP PEMBROKE PINES FL 33024

TITLE T  
 NAME MEDINA, ROSEMARY ☒ Delete  
 STREET ADDRESS 139 NORTHWEST 93RD AVENUE  
 CITY-ST-ZIP PEMBROKE PINES FL 33024

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 Director A Swimming Instructor ☐ Change ☐ Addition  
 NAME Edgardo A De Leon  
 STREET ADDRESS 3821 SW 160th Ave #103  
 CITY-ST-ZIP Miramar, FL 33027

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

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

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 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:

Edgardo A De Leon

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/22/02

Date

954-4310588

Daytime Phone #

CR2E034 (9/01)