2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P02000000515 1. Entity Name GENJE POOLS MIAMI FLORIDA INC. 03 JUN 17 AM 11: 29 SECRETARY OF STATE Principal Place of Business Mailing Address TALLAHASSFE, FLORIDA 2950 SW 71 AVENUE 2950 SW 71 AVENUE MIANI, FL 33155 MIANI, FL 33155 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Sulte, Apt. #, etc. CHECK HERE IF MAKING CHANGES 4. FEI Number 75-2918237 Applied For City & State City & State Not Applicable Zìp Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MARTINEZ, MARCOS A 2910 SW 76 AVENUE Street Address (P.O. Box Number is Not Acceptable) MIAMI, FL 33155 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 Fiorida. I am familiar with, and accept the obligations of registered agent. Signature, typed or primed name of registered agent and see if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: IT 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 \$5.00 May Be Trust Fund Contribution. \Box Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10 11 CRZE034 (10/02) TITLE ÞΩ Delete TITLE ☐ Change Addition MARTINEZ MARCOS A NAME NAME 800021383628 2910 SW 76 AVENUE STREET ADDRESS STREET ADDRESS 07/08/03--01041--015 **450.00 MIAMI, FL 33155 CITY-ST-ZIP City-ST-21P TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-51-ZP COY-ST-21P TITLE Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TILLE ☐ Chance ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-2P CITY-ST-ZIP TITLE Delete TALE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-21P CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-7IP 12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3XI). 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 ettachmentation in additional with all other like empowered. with all other like empowered. changed, or on an attachn SIGNATURE:

PYPED OR PRINTED MAKE OF SIGNING OFFICER OR DIRECTOR

Daytime Phone 4

Day

GENIE POOLS MIAMI FLORIDA INC.

TO: DIVISION OF CORPORATION
P.O. BOX 6327
TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN:

AS PER YOUR INSTRUCTIONS, ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

I NEVER RECEIVED ANY NOTICE FROM YOUR OFFICE FOR 2003 UNIFORM BUSINESS REPORT. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS AND WAIVE ANY LATE FEES.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME.

MASSET TOWN

PRESIDENT