


FILED
Apr 29, 2004 8:00 am
Secretary of State

02-27-2004 90014 005 ***150.00

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

0000000000 P02000007853 1. Entity Name CRAIG'S POOLS INC.	
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Principal Place of Business 9805 N.W. 70TH STREET TAMARAC, FL 33321	Mailing Address 9805 N.W. 70TH STREET TAMARAC, FL 33321
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66417095



02232004

DO NOT WRITE IN THIS SPACE

4. FEI Number 80-0028883	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75

6. Name and Address of Current Registered Agent CRAIG, STARLA S 9805 N.W. 70TH STREET TAMARAC, FL 33321
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**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P CRAIG, STARLA S 9805 N.W. 70TH STREET TAMARAC, FL 33321
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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Starla S. Craig 4/2/2004 954-812-3326
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #