

03
FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED

03 APR 10 AM 11:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

P02000028522

1. Entity Name

PoolBiz, Inc.



DO NOT WRITE IN THIS SPACE

600015557906
04/09/13--01061--003 **\$1.25

2. Principal Place of Business

1120 Homewood Blvd.

Suite, Apt. #, etc.

Apt. # G204

City & State

Delray Beach, FL

Zip
33445

3. Mailing Address

1120 Homewood Blvd

Suite, Apt. #, etc.

Apt. # G204

City & State

Delray Beach, FL

Zip
33445

Country

4. FEI Number

02-0568523

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

Ryan Muller

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

1120 Homewood Blvd. G204

City

Delray Beach

FL

Zip Code

33445

**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

Ryan Muller

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3-31-03

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing

Trust Fund Contribution.

☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Pres, VP, Sec, Treasurer
Ryan Muller
1120 Homewood Blvd. G204
Delray Beach, FL 33445

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Ryan Muller

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-31-03

CR2E034B (12/02)