

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000035788

FILED  
Mar 10, 2007  
Secretary of State

Entity Name: PRO-ACTIVE POOL CORPORATION

**Current Principal Place of Business:**

5065 WILES RD.  
#201  
COCONUT CREEK, FL 33073

**New Principal Place of Business:**

**Current Mailing Address:**

5065 WILES RD.  
#201  
COCONUT CREEK, FL 33073

**New Mailing Address:**

FEI Number: 01-0646472

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TAX HOUSE CORPORATION  
1261 E SAMPLE RD  
POMPANO BEACH, FL 33064 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: PINTO, NEWTON  
Address: 5460 LYONS RD  
City-St-Zip: COCONUT CREEK, FL 330732816

Title: D ( ) Delete  
Name: RIBAS, ANTONIO  
Address: 4892 N DIXIE HWY  
City-St-Zip: OAKLAND PARK, FL 33334

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NEWTON PINTO

PD

03/10/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date