

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 01, 2006 8:00 am**  
**Secretary of State**

05-01-2006 90369 043 \*\*\*158.75

**DOCUMENT # P02000041084**

1. Entity Name  
R.F. POOL SERVICES INC.



Principal Place of Business  
7410 S.W. 8TH ST.  
MIAMI, FL 33144

Mailing Address  
7410 S.W. 8TH ST.  
MIAMI, FL 33144

40074181



04262006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
02-0583342

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

ACOSTA, ELSA C  
6771 SW 4TH STREET  
MIAMI, FL 33144

**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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE PD  
NAME CURNOW, FRANK  
STREET ADDRESS 7410 S.W. 8TH ST.  
CITY-ST-ZIP MIAMI, FL 33144

TITLE VD  
NAME ROBAINA, GERARDO  
STREET ADDRESS 6771 SW 4 STREET  
CITY-ST-ZIP MIAMI, FL 33144

TITLE SD  
NAME ACOSTA, ELSA C  
STREET ADDRESS 6771 SW 4 STREET  
CITY-ST-ZIP MIAMI, FL 33144

TITLE D  
NAME DIAZ, FRANCISCO  
STREET ADDRESS 7410 S.W. 8TH ST.  
CITY-ST-ZIP MIAMI, FL 33144

TITLE D  
NAME OLAZABAL, PABLO  
STREET ADDRESS 7410 S.W. 8TH ST.  
CITY-ST-ZIP MIAMI, FL 33144

TITLE D  
NAME COBREIRO, JUAN  
STREET ADDRESS 7410 S.W. 8TH ST.  
CITY-ST-ZIP MIAMI, FL 33144

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Frank Curnow

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/24/06

Date

305-262-5998

Daytime Phone #