2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000041084

1. Entity Name

R.F. POOL SERVICES INC.



FILED Mar 31, 2003 8:00 am Secretary of State

03-31-2003 90160 042 ***158.75

NAME STREET ADDRESS CITY-ST-ZIP MIAMIFEL 33144 STREET ADDRESS CITY-ST-ZIP	7410 S.W. 8TI MIAMI FL 331		Mailing Address 7410 S.W. 8TH ST. MIAMI FL 33144			Annual Control			
City & State Country Country S. Certificate of Status Desired Registered Agent 7. Name and Address of New Registered Agent ACOSTA, ELSA C STORY Addisonal Frequency ACOSTA, ELSA C STORY Addisonal Frequency Story Addisonal Frequency Name ACOSTA, ELSA C STORY Addisonal Frequency Story Addisonal Frequency Story Addisonal Frequency Name City & State Name ACOSTA, ELSA C Story Addisonal Frequency Story Addisonal Frequency Story Addisonal Frequency Name City & State Name City & State Name ACOSTA, ELSA C Story Addisonal Frequency Addisonal Frequency Story Addisonal Frequency Addisonal Frequency Story Addisonal Frequency Story Addisonal Frequency Addisonal Frequency Addisonal Frequency Story Addisonal Frequency Addisonal	Principal Place of Business 3. Mailing Address					-			
Zp Country Zp Country Zp Country St. 75 Additional Face Plant Applied St. 75 Additional Face Plant According to the Plant According to th	Suite, Apt. #, etc. Suite, Apt. #			#, etc.		CHECK HERE IF MAKING CHANGES			
S. Name and Address of Current Registered Agent S. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent ACOSTA, ELSA C 1445 VILLAGE SRETH PR MIAMI FL-39476 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 Fords. I am familiar with, and accent the obligations of registered agent. SIGNATURE FILE NOW!!! FEE IS 5150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Floridal Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II III MAKE CURNOW, FRANK Dedge CURNOW, FRANK CURNOW, FRANK CURNOW, FRANK STREET ADDRESS CUT-51-2P MIAMI FL 33144 TILE SOBJECT ADDRESS CUT-51-2P MIAMI FL 33144 TI	City & Stat	te	City & State		*		R3342		
S. Name and Address of Current Registered Agent ACOSTA, ELSA C 3135 VILLAGE GREEN OR MIAMI FL-88176 8. The above named entity submits this satement for the purpose of changing its registered diffice or registered agent, or both, in the State of Florida. I am familiar with, and accent the obligations of registered agent. Signature FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TILE CURNOW, FRANK SIBER ADDRESS CITY-ST-2P MAMI FL 33144 TILE SIBER ADDRESS COTY-ST-2P MAMI FL 33144 TILE SOD Dedde TILE COTY-ST-2P MAMI FL 33144 TILE SOD Dedde TILE COTY-ST-2P MAMI FL 33144 TILE SOD Dedde TILE SOD Dedde TILE COTY-ST-2P MAMI FL 33144 TILE SOD DEDDED DEDDED DEDDED TILE STEET ADDRESS STEET	Zip	Country	Zip	Count	ry			\$8.75 Ad	ditional
ACOSTA, ELSA C 1045 YILLAGE GREEN DR MIAMI FL-38476 8. The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Florida. I am familiar with, and according to complete dagent or projected agent. SIGNATURE FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TILE CURNOW, FRANK STREET ADDRESS, CURNOW, FRANK STREET ADD		6. Name and Address of Currer	nt Registered Agent	I		7. Name and Add	ress of New Register	ed Agent	
### STORY STORY OF THE CONTYST-ZP ### ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS ### ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IT ILL ### ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN IT ### ADDITIONS/CHANGES TO OF					Name			: 	
MAMI FL -38475 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 accelerate the obligations of registered agent. SIGNATURE Syndam, press or predict name of registered agent and deer il applicable. FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 THE NAME CURNOW, FRANK THE STREET ADDRESS AND DIRECTORS IN 11 THE NAME ROBAINA, GERARDO THUS W. 8TH ST. OTT-S1-2P MAMI FL 33144 Deete THE NAME STREET ADDRESS ACOSTA, ELSA C STREET ADDRESS DIAZ, FRANCISCO THIS SUPPLY ADDRESS DIAZ, FRANCISCO THIS STREET ADDRESS THE ADDRE					Street Address	(P.O. Box Number is 1)	lot Acceptable)		
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I arm familiar with, and according to object of the obligations of registered agent. SIGNATURE Signature Signature predictions of registered agent and time it applicable. (NOTE Programed Agent signature required when revisatoring) DATE	-3135 VILL	S1SS VILLAGE GREEN DR			6771	5. W.47	h St		
8. The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Florida. 1 am familiar with, and accert the obligations of registered agent. SIGNATURE FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10.	MIAMI FL-	33175							
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## After May 1, 2003 Fee will be \$550.00 Maye ## After May 1, 2003 Fee will be \$550.00 Maye ## Added to Fee ## Added to Fe	the obligat	tions of registered agent.	. , ,		d office or registe	red agent, or both, in i			and accept
TITLE	After Make Check	r May 1, 2003 Fee will be \$550.00 R Payable to Florida Department	of State			Trust Fu	nd Contribution.	Added	d to Fees
NAME CURNOW, FRANK 7410 S.W. 8TH ST. CITY-ST-ZIP		•				ADDITIONS/CHAI	NGES TO OFFICERS A		·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·
NAME STREET ADDRESS CTY-ST-ZIP MIAMIF L-33144 CTY-	NAME STREET ADDRESS	CURNOW, FRANK 7410 S.W. 8TH ST.	L_J Delete	NAME STREE	T ADDRESS			□ Change	C) Addition
TITLE	NAME STREET ADDRESS	ROBAINA, GERARDO 7410 S.W. 8TH ST.	☐ Delete	name Stree	T ADDRESS 67	715.W.	45T	Change	☐ Addition
NAME	TITLE		□ Delete	TITLE				14 Change	Addition
TITLE DIAZ, FRANCISCO NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME OLAZABAL, PABLO STREET ADDRESS CITY-ST-ZIP TITLE NAME OLAZABAL, PABLO STREET ADDRESS CITY-ST-ZIP TITLE D NAME STREET ADDRESS CITY-ST-ZIP TITLE D NAME STREET ADDRESS CITY-ST-ZIP TITLE D COBREIRO, JUAN STREET ADDRESS TITLE NAME STREET ADDRESS STREET ADDRESS TITLE STREET ADDRESS TITLE NAME STREET ADDRESS TITLE STREET ADDRESS TITLE STREET ADDRESS TITLE NAME STREET ADDRESS TITLE STREET ADDRESS	STREET ADDRESS	7410 S.W. 0TH ST.	ر المعلقة المراكبة الماد المادي	STREE	TADDRESS 67	71 5.W.	45T 33144		
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NAME COBREIRO, JUAN STREET ADDRESS 7410 S.W. 8TH ST. STREET ADDRESS STREET ADDRESS	NAME STREET ADDRESS	OLAZABAL, PABLO 7410 S.W. 8TH ST.	☐ Delete	NAME STREE	T ADDRESS	. •		☐ Change	☐ Addition
	NAME STREET ADDRESS	COBREIRO, JUAN 7410 S.W. 8TH ST.	☐ Delete	NAME STREE	T ADDRESS			☐ Change	Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: X

IG OFFICER OR DIRECTOR

03/27/03 (30r)262-v998

CR2E034 (10/02)