2007 FOR PROFIT CORPORATION

FILED Aug 03, 2007 08:00 AM Secretary of State ANNUAL REPORT DOCUMENT # P03000002866 1. Entity Name BRITTANY POOL COMPANY, INC. Principal Place of Business Mailing Address 43354 HWY 27 NORTH 333 ETHAN AVENUE CONTEMPO PLAZA DAVENPORT, FL 33837 US DAVENPORT, FL 33837 06262007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 43-2006581 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ZANDIEH, MOHAMMAD H DO NOT WRITE 333 ETHAN AVENUE DAVENPORT, FL 33837 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 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Due by September 14, 2007 Added to Fees corporation did not receive the prior notice. OFFICERS AND DIRECTORS 10. TITLE NAME ZANDIEH, MOHAMMAD H STREET ADDRESS 333 ETHAN AVENUE CITY-ST-ZIP DAVENPORT, FL 33838 ۱/P U00000771298 ZANDIEH, AMIR NAME 08/03/07-80001-008 150.00 STREET ADDRESS 333 ETHAN AVENUE CITY-ST-ZIP DAVENPORT, FL 33837 TITLE ZANDIEH, REBECCA NAME STREET ADDRESS 333 ETHAN AVENUE DO NOT WRITE CITY-ST-ZIP DAVENPORT, FL 33837 TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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.

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR DAINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-31~07

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