

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000013843

FILED
Mar 15, 2004
Secretary of State

Entity Name: SWIMMING POOLS BY CAPTAIN REBAR INC.

Current Principal Place of Business:

11584 NW 44TH ST
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

11584 NW 44TH ST
CORAL SPRINGS, FL 33065

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OWENS, CHARLES REED
11584 NW 44TH ST
CORAL SPRINGS, FL 33065

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: D () Delete
Name: OWENS, CHARLES R
Address: 11584 NW 44TH ST
City-St-Zip: CORAL SPRINGS, FL 33065

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP () Change (X) Addition
Name: OWENS, DAVID C
Address: 11584 NW 44TH STREET
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VP () Change (X) Addition
Name: BETHESO, WILLIAM
Address: 11584 NW 44TH STREET
City-St-Zip: CORAL SPRINGS, FL 33065

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CHARLES R. OWENS

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03/15/2004

Electronic Signature of Signing Officer or Director

_____ Date