

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000014902

Entity Name: KING POOL SERVICE, INC.

FILED
Jun 08, 2005
Secretary of State

Current Principal Place of Business:

19010 CLOUD LAKE CIR
BOCA RATON, FL 33496

New Principal Place of Business:

2009 NW 49TH AVE
COCONUT CREEK, FL 33063

Current Mailing Address:

19010 CLOUD LAKE CIR
BOCA RATON, FL 33496

New Mailing Address:

2009 NW 49TH AVE
COCONUT CREEK, FL 33063

FEI Number: 20-0670902

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REIS, MARCIO
19010 CLOUD LAKE CIR
BOCA RATON, FL 33496 US

Name and Address of New Registered Agent:

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

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: TAX HOUSE CORPORATION

06/08/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MARCIO, REIS
Address: 19010 CLOUD LAKE CIR
City-St-Zip: BOCA RATON, FL 33496

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: KARLA, REIS C
Address: 2009 NW 49TH AVE
City-St-Zip: COCONUT CREEK, FL 33063

Title: D () Change (X) Addition
Name: MARCIO, REIS
Address: 2009 NW 49TH AVE
City-St-Zip: COCONUT CREEK, FL 33063

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: KARLA C REIS

PS

06/08/2005

Electronic Signature of Signing Officer or Director

Date