

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000141867

FILED
May 23, 2008
Secretary of State

Entity Name: LUIS POOL CARE SERVICE, INC.

Current Principal Place of Business:

4519 FLINTLOCK DRIVE
ORLANDO, FL 32808

New Principal Place of Business:

Current Mailing Address:

4519 FLINTLOCK DRIVE
ORLANDO, FL 32808

New Mailing Address:

FEI Number: 20-1741395

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEDINA, NOEMI
500 CYPRESS CREEK ROAD
SUITE 230
FORT LAUDERDALE, FL 33309 US

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

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: ROSA ORTIZ, LUIS A
Address: 4519 FLINTLOCK DRIVE
City-St-Zip: ORLANDO, FL 32808

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: LUIS ROSA ORTIZ

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05/23/2008

Electronic Signature of Signing Officer or Director

Date