

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000129244

FILED  
Apr 24, 2006  
Secretary of State

Entity Name: BRIGHTER POOLS OF FLORIDA INC

## Current Principal Place of Business:

18227 48TH.AVENUE NORTH  
LOXAHATCHEE, FL 33470

## New Principal Place of Business:

## Current Mailing Address:

18227 48TH.AVENUE NORTH  
LOXAHATCHEE, FL 33470

## New Mailing Address:

18227 48TH. AVENUE NORTH  
LOXAHATCHEE, FL 33470

FEI Number: 20-3522461

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MARTINEZ, JOSEPH  
18227 48TH. AVE.NORTH  
LOXAHATCHEE, FL 33470 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MARTINEZ, JOSEPH  
Address: 18227 48TH.AVE.NORTH  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: VP,S ( ) Delete  
Name: MARTINEZ, TARA,LEE,  
Address: 18227 48TH.AVE. NORTH  
City-St-Zip: LOXAHATCHEE, FL 33470

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MARTINEZ, JOSEPH  
Address: 18227 48TH AVE NORTH  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: VP,S (X) Change ( ) Addition  
Name: MARTINEZ, TARA LEE  
Address: 18227 48TH AVE NORTH  
City-St-Zip: LOXAHATCHEE, FL 33470

I hereby certify that the information supplied with this filing does not qualify for the 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: TARA LEE MARTINEZ

VP,S

04/24/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date