

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 14, 2008 08:00 AM
Secretary of State

DOCUMENT # P05000130329

1. Entity Name
POOL SERVICES BY REYES, INC.



Principal Place of Business
**907 N WILSON AVENUE #335
BARTOW, FL 33830**

Mailing Address
**907 N WILSON AVENUE #335
BARTOW, FL 33830**



04082008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
76-0811341

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**REYES, OVIN
907 N WILSON AVENUE #335
BARTOW, FL 33830**

**DO NOT WRITE
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
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	REYES, OVIN
STREET ADDRESS	907 N WILSON AVENUE #335
CITY-ST-ZIP	BARTOW, FL 33830
TITLE	V
NAME	REYES, FLOR
STREET ADDRESS	907 N WILSON AVENUE #335
CITY-ST-ZIP	BARTOW, FL 33830
TITLE	S
NAME	AVILA, MARCO
STREET ADDRESS	1530 PALM PLACE
CITY-ST-ZIP	BARTOW, FL 33830
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000895312
04/24/08-80063-016 150.00

**DO NOT WRITE
IN THIS SPACE**

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.