

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000048338

Entity Name: DM POOL & SPA SERVICE, INC.

FILED  
Apr 21, 2008  
Secretary of State

**Current Principal Place of Business:**

P.O BOX 165932  
MIAMI, FL 33116

**New Principal Place of Business:**

**Current Mailing Address:**

P.O BOX 165932  
MIAMI, FL 33116

**New Mailing Address:**

FEI Number: 20-4649835

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MUNOZ, OLGA L  
5600 NW 36 ST  
SUITE 103  
MIAMI, FL 33159 US

**Name and Address of New Registered Agent:**

DIOSDADO, MUNIVE  
27169 SW 140 PATH  
HOMESTEAD, FL 33032

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: DIOSDADO MUNIVE

04/21/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MUNIVE, DIOSDADO  
Address: P.O BOX 165932  
City-St-Zip: MIAMI, FL 33116

**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: DIOSDADO MUNIVE

P

04/21/2008

Electronic Signature of Signing Officer or Director

Date