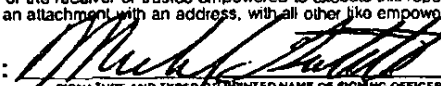


2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 30, 2007 8:00 am
Secretary of State

02-28-2007 90010 025 ***150.00

DOCUMENT # P06000060327 1. Entity Name BLUE HAWAIIAN FIBERGLASS POOLS OF SOUTH AND CENTRAL FLORIDA, INC.																							
Principal Place of Business 8680 TOURMALINE BLVD. BOYNTON BEACH FL 33437			Mailing Address 8680 TOURMALINE BLVD. BOYNTON BEACH FL 33437																				
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																					
City & State Zip Country		City & State Zip Country		4. FEI Number 20-4817286 Applied For ☐ Not Applicable																			
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				1st MOORE CR2E034 (10/06)																			
6. Name and Address of Current Registered Agent GUTILLA, MICHAEL 8680 TOURMALINE BLVD. BOYNTON BEACH FL 33437			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																				
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 _____ (NOTE: Registered Agent signature required when registering) DATE _____																							
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																				
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">NAME</td> <td style="width: 20%; text-align: right;">Delete ☐</td> </tr> <tr> <td>STREET ADDRESS</td> <td>GUTILLA, MICHAEL</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>8680 TOURMALINE BLVD. BOYNTON BEACH FL 33437</td> <td></td> </tr> </table>			TITLE	NAME	Delete ☐	STREET ADDRESS	GUTILLA, MICHAEL		CITY- ST- ZIP	8680 TOURMALINE BLVD. BOYNTON BEACH FL 33437		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">NAME</td> <td style="width: 20%; text-align: right;">Change ☐ Addition ☐</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> </table>			TITLE	NAME	Change ☐ Addition ☐	STREET ADDRESS			CITY- ST- ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.																							
SIGNATURE:  Date _____ Cayman Phone # _____																							