## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000135875

City-St-Zip: OAKLAND PARK, FL 33334

Entity Name: CHLORINE PLUS POOL SERVICES, CORP.

FILED Mar 25, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
4892 N. DI OAKLAND	IXIE HWY ) PARK, FL 33	3334			
Current Mailing Address:			New Mailing Address:		
5079 N DIX	XIE HWY				
276 OAKLAND	PARK, FL 33	3334			
FEI Number	: 13-4346879	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of (	Current Registered Agent:	Name and Address o	f New Registered Agent:	
4892 N. DI OAKLAND The above	) PARK, FL 33	3334 US	purpose of changing its registered	d office or registered agent, or both,	
SIGNATUI					
0.014/ (101		nic Signature of Registered A	gent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PDS ( PINTO MOLINA 4892 N. DIXIE OAKLAND PAR	HWY	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	VPDT ( RIBAS, MARIA 4892 N. DIXIE		Title: Name: Address:	( ) Change ( ) Addition	

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: MPMOLINA PDS 03/25/2009