2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000082554

HIDALGO, ANGIE K

2822 NW 108 AVE

SUNRISE, FL 33322

Name: Address:

City-St-Zip:

FILED Jul 28, 2008 Secretary of State

Entity Name: PIPELINE POOL SERVICES, INC. **Current Principal Place of Business: New Principal Place of Business:** 2822 NW 108 AVE SUNRISE, FL 33322 **Current Mailing Address: New Mailing Address:** 2822 NW 108 AVE SUNRISE, FL 33322 FEI Number: 26-0562657 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TOTALCORP BUSINESS CONSULTANTS CORP HIDALGO, CARLOS A 1820 N CORPORATE LAKES BLVD 2822 NW 108 AVE SUNRISE, FL 33322 US 206-8 WESTON, FL 33326 US 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: CARLOS A HIDALGO 07/28/2008 Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition HIDALGO, CARLOS A Name: Name: 2822 NW 108 AVE Address: Address: City-St-Zip: SUNRISE, FL 33322 City-St-Zip: Title: VΡ Title: () Change () Addition () Delete Name: HIDALGO, MELISSA F Name: 2822 NW 108 AVE Address: Address: City-St-Zip: SUNRISE, FL 33322 City-St-Zip: Title: Title: () Delete SC (X) Change () Addition HIDALGO, JACQUELINE S HIDALGO, JACQUELINE S Name: Name: 2822 NW 108 AVE 2822 NW 108 AVE Address: Address: City-St-Zip: SUNRISE, FL 33322 City-St-Zip: SUNRISE, FL 33322 Title: VΡ () Delete Title: (X) Change () Addition

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.

Name:

Address:

City-St-Zip:

HIDALGO, ANGIE K

2822 NW 108 AVE

SUNRISE, FL 33322

Ρ SIGNATURE: CARLOS A HIDALGO 07/28/2008