

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

3. Mar 17, 2008 8:00 am  
Secretary of State

03-04-2008 90020 028 \*\*\*150.00

DOCUMENT # P07000082624

1. Entity Name  
MBA POOL & SPA, INC.



Principal Place of Business  
3782 EDGAR AVENUE  
BOYNTON BEACH, FL 33436 US

Mailing Address  
3782 EDGAR AVENUE  
BOYNTON BEACH, FL 33436 US

66003997



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02242008 Chg-P CR2E034 (12/06)

City & State

City & State

4. FEI Number

26-0970371

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ANDREWS, MARTIN B  
3782 EDGAR AVENUE  
BOYNTON BEACH, FL 33436

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

Signature, typed or printed name of registered agent and state if applicable.

(NOTE: Registered Agent signature required when resigning)

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

P  
ANDREWS, MARTIN B  
3782 EDGAR AVENUE  
BOYNTON BEACH, FL 33436

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

SEC  
ANDREWS, MARTIN B  
3782 EDGAR AVENUE  
BOYNTON BEACH, FL 33436

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TREA  
ANDREWS, MARTIN B  
3782 EDGAR AVENUE  
BOYNTON BEACH, FL 33436

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TREASURER  
ANDREWS, JOAN L  
3782 EDGAR AVE  
BOYNTON BEACH FL 33436

☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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☐ Change ☐ Addition

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☐ Change ☐ Addition

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.

SIGNATURE *Martin B Andrews* MARTIN B ANDREWS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/24/08 561-400-4405

Date

Daytime Phone