

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000084654

FILED
Apr 27, 2009
Secretary of State

Entity Name: OZON POOL SERVICES INC

Current Principal Place of Business:

4951 HAWERHILL COMM
25
WEST PALM BEACH, FL 33417

Current Mailing Address:

4951 HAWERHILL COMM
25
WEST PALM BEACH, FL 33417

New Principal Place of Business:

1410 SUMMIT PINES BLVD
927
WEST PALM BEACH, FL 33415

New Mailing Address:

1410 SUMMIT PINES BLVD
927
WEST PALM BEACH, FL 33415

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

D'LEON ENTERPRISES
11201 SW 55TH STREET
148
MIAMI, FL 33025 US

Name and Address of New Registered Agent:

KATHLEEN RUIZ
5266 NW 106TH DRIVE
CORAL SPRINGS, FL 33076 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: KATHLEEN RUIZ

04/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COLLAZOS, JAIME E
Address: 4951 HAWERHILL COMM #25
City-St-Zip: WEST PALM BEACH, FL 33417

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: COLLAZOS, JAIME E
Address: 1410 SUMMIT PINES BLVD
City-St-Zip: WEST PALM BEACH, FL 33415

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: JAIME E COLLAZOS

P

04/27/2009

Electronic Signature of Signing Officer or Director

Date