

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000015818

**FILED**  
**Mar 21, 2012**  
**Secretary of State**

**Entity Name:** TRIPLE A POOL & PATIO SUPPLIES, INC

**Current Principal Place of Business:**

2121 PONCE DE LEON BLVD  
711  
CORAL GABLES, FL 33134 US

**New Principal Place of Business:**

14335 SW 120 STREET  
210  
MIAMI, FL 33186 US

**Current Mailing Address:**

2121 PONCE DE LEON BLVD  
711  
CORAL GABLES, FL 33134 US

**New Mailing Address:**

12266 SW 215 TERRACE  
MIAMI, FL 33177

**FEI Number:** 27-5004422

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SCHECHNER, MARK S  
2121 PONCE DE LEON BLVD  
711  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

SCHECHNER, MARK S P.A.  
2121 PONCE DE LEON BLVD  
711  
CORAL GABLES, FL 33134 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: MARK S. SCHECHNER

03/21/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: CAYON, DIEGO  
Address: 14335 SW 120 STREET, SUITE # 210  
City-St-Zip: MIAMI, FL 33186 US

Title: SECR  
Name: MALAGON, MARIA B  
Address: 12266 SW 215 TERRACE  
City-St-Zip: MIAMI, FL 33177 US

I hereby 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 all other like empowered.

SIGNATURE: MARIA B. MALAGON

SECR

03/21/2012

Electronic Signature of Signing Officer or Director

Date