

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000001380

Entity Name: MAKO POOLS, INC.

FILED
Apr 14, 2009
Secretary of State

Current Principal Place of Business:

16118 72ND RD N.
LOXAHATCHEE, FL 33470

New Principal Place of Business:

Current Mailing Address:

PO BOX 540387
LAKE WORTH, FL 33454

New Mailing Address:

16118 72ND RD N.
LOXAHATCHEE, FL 33470

FEI Number: 65-0384494

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BATIGNANI, DAVID
16118 72ND RD N.
LOXAHATCHEE, FL 33470 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BATIGNANI, DAVID
Address: 16118 72ND RD N.
City-St-Zip: LOXAHATCHEE, FL 33470

Title: VP () Delete
Name: BATIGNANI, KARRI
Address: 16118 72ND RD N.
City-St-Zip: LOXAHATCHEE, FL 33470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: KARRI BATIGNANI

VP

04/14/2009

Electronic Signature of Signing Officer or Director

Date