

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000071806 (2)

1. Corporation Name

TEDS PARADISE POOLS, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 14 PM 2:08

Principal Place of Business
16634 ROYAL POINCIANA DRIVE
FORT LAUDERDALE FL 33326

Mailing Address
16634 ROYAL POINCIANA DRIVE
FORT LAUDERDALE FL 33326

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 10/13/1993
3a. Date of Last Report 03/17/1994
4. FEI Number 65-0388063
Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country
25
26 Mailing Address
27 Suite, Apt. #, etc.
28 City & State
29 Zip
30 Country

9. Name and Address of Current Registered Agent

TENPAS, TED
16634 ROYAL POINCIANA DRIVE
FORT LAUDERDALE FL 33326

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent Signature required when transferring)

DATE

12. OFFICERS AND DIRECTORS

1. TITLE D
NAME TENPAS, TED
STREET ADDRESS 16634 ROYAL POINCIANA
CITY- ST- ZIP FT. LAUDERDALE FL 33326

2. TITLE D
NAME TENPAS, KATHY
STREET ADDRESS 16634 ROYAL POINCIANA
CITY- ST- ZIP FT. LAUDERDALE FL 33326

3. TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

4. TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

5. TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

6. TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. 1. TITLE ☐ Change ☐ Addition
2. 2. NAME
3. 3. STREET ADDRESS
4. 4. CITY- ST- ZIP

5. 5. TITLE ☐ Change ☐ Addition
6. 6. NAME
7. 7. STREET ADDRESS
8. 8. CITY- ST- ZIP

9. 9. TITLE ☐ Change ☐ Addition
10. 10. NAME
11. 11. STREET ADDRESS
12. 12. CITY- ST- ZIP

13. 13. TITLE ☐ Change ☐ Addition
14. 14. NAME
15. 15. STREET ADDRESS
16. 16. CITY- ST- ZIP

17. 17. TITLE ☐ Change ☐ Addition
18. 18. NAME
19. 19. STREET ADDRESS
20. 20. CITY- ST- ZIP

21. 21. TITLE ☐ Change ☐ Addition
22. 22. NAME
23. 23. STREET ADDRESS
24. 24. CITY- ST- ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information included on this annual report or supplemental annual 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 treasurer or transfer agent empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of this document, or on an attachment with an address.

SIGNATURE:

Kathy Tenpas
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kathy Tenpas

2/10/95
DATE

Signature Page 2