

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000072268 (3)

1. Corporation Name

POOL SAVERS SERVICE, INC.



Principal Place of Business

Mailing Address

3333 W. ATLANTIC BLVD.
STE 22
POMPANO BEACH FL 33069
US

3333 W. ATLANTIC BLVD.
STE 22
POMPANO BEACH FL 33069
US

3. Date Incorporated or Qualified
10/03/1994

3a. Date of Last Report
04/06/1995

2. Principal Place of Business

2a. Mailing Address

21 2621 NE 9th Ave

26 P.O. Box 5232

Suite, Apt #, etc

Suite, Apt #, etc

22 City & State

27 City & State

23 Pompano Beach, FLA

28 Lighthouse Pk. FLA 33074

Zip

Country

Zip

Country

24 33064

25 USA

29 33074

30 USA

4. FEI Number
65-0523009

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SMITH, MICHAEL B
3333 W. ATLANTIC BLVD.
STE. 22
POMPANO BEACH FL 33069

81 Name

Jones, William J. Jones

82 Street Address (P.O. Box Number is Not Acceptable)

2621 NE 9th Ave

83

84 City

Pompano Beach

FL

85 Zip Code

33064

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

William J. Jones

William J. Jones

President

7/23/96

(Signature typed or printed in block of registered agent and then applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

D
SMITH, MICHAEL B
6574 N STATE ROAD 7 SUITE 345
COCONUT CREEK FL 33073

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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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 indicated 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 receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: William J. Jones William J. Jones 7/23/96 954-946-3533
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/96)