FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000059431 (3)

POOL BALANCE, INC.

FILED										
Apr 25 1997 8:00am										
Secretary of State										



Principal Place of Business				Mailing Address									******			
3109 STIRLING RD			-	3109 STIRLING RD												
#201				201 T. I. ALIDED	IDALE EL 94	2212 6550			ļ							
FT LAUDERDALE FL 33312			r	FT LAUDERDALE FL 33312-6558					ŀ	3. Date incorporated or Quali	Qualified 3a. Date of Last Report					
								,		07/31/1995		05/0	1/199	6		
2. Principal Place of Business				. Mailing	Address					4. FEI Number		·		Applie	d For	
21				26						65-0609527 Not Applicable					plicable	
Sulte, Apt. #, etc.				Suite, Apt. #, etc.						5. Certificate of Status Desired \$8.75 Additional					ional	
22				27						5. Certificate of Status Desire	0	LJ	Fee	Requir	ed	
City & State				City & State						6. Election Campaign Financing \$5.00 May Be						
23			28	28						Trust Fund Contribution	_	Added to Fees				
Zip	Country						auntry	untry 8		8. This corporation has liabilit	y for int	or intangible tax under s. 199.032,				
24	25		29	30						Florida Statutes Yes No					1	
	9, Name	and Address of Curre			gent		- T			10. Name and Address of Ne	w Regi	stered A	gent			
CHA	UVIER, DA	NIEL	-		· · · · ·		81	Name			•					
	STIRLING						00	Chroni	Addison	a /D.O. Bay Number is Not Ass	ontobio					
#201								82 Street Address (P.O. Box Number is Not Acceptable)								
		LE FL 33312					83									
	AODENOA	LE I L GOOTE					L									
							84	City				FL	85 2	Zip Cod	0	
44 Durayant	he the provin	inno of Continuo 607 06	baa CO.	007 1500	Elorido Ct	alulae tha	abov		i corpor	ation submits this statement for	the nu		chapoir	na its re	gistered	
office or r	egistered ac	gent, or both, in the Stat	te of Flor	rida. Suci	n change w	as authori	zed by	the cor	rporation	ation submits this statement for n's board of directors. I hereby	accept	the appo	intmen	t as regi	stered	
agent. I a	m familiar w	ith, and accept the obli	gations	of, Sectio	n 607.0505	i, Florida S	itatutes	8.								
SIGNATURE												DATE				
12.	Signature, typed	or printed name of registered a OFFICERS A			olc .	(NOTE: Regist		ent signatur	e requirea	when reinstating) ADDITIONS/CHANGES TO (OFFICE		DIREC:	TORS IN	1 12	
TITLE	D	OF TIGHTS A	INC/ DITTO	01010	DELFTE		1 TITLE		1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Char		Addition	
		ER, DANIEL					2 NAME					•	_			
NAME								. ADENDECO								
STREET ADDRESS 3109 STIRLING RD #201 CITY-ST-7IP FT LAUDERDALE FL 33312								ADDRESS								
CITY-ST-ZIP	FILMUL	EUDYFE LF 222 IS			DELETE		4 CITY - S	31 - ZIP					Char	nne T	Addition	
TITLE					L) VELENE		1 TITLE					1	Ona	iào ⊏	1 /100/1011	
NAME							2 NAME								}	
STREET ADDRESS								ADDRESS							ŀ	
CITY-ST-ZIP							4 CITY -	S1-ZIP	 						1 4 4 2 5 2 2	
TITLE					☐ DELETE		1 10116		1				Char	ige L] Addition	
NAME						3.	2 NAME									
STREET ADDRESS						3.	3 STREET	ADDRESS]	
CITY-ST-ZIP							4. CITY -	S1 - 2IP	<u> </u>					-	14478	
TITLE					☐ DELETE	. 4.	1 TITLE						Char	nge L	Addition	
NAME						4.	2 NAME									
STREET ADDRESS						4.	3 STREET	I ADDRESS								
CITY-ST-ZIP						4.	4 C/TY-S	ST- Z IP								
TITLE					DELETE	5	1 TITLE						[]] Char	nge 🗀	Addition	
NAME						5	2 NAME									
STREET ADDRESS						5	3 STREET	T ADDRESS								
CITY-ST-ZIP	}						4 CITY - 8		1							
TITLE	 				DELETE		1 TITLE		1				Cha	nge 📗	Addition	
NAME							2 NAME									
STREET ADDRESS								T ADDRESS		•						
1							.4 CITY - 3									
CITY-ST-ZIP						b.	H WILL -	31-511								

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or Supplemental almust 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 report of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 12 if changed, or ony at attachment with an address.