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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9500060206

GARVIS POOL REPAIR, INC.

**GNATURE:** 

## **FILED** Feb 20, 1999 8:00 am Secretary of State

02-20-1999 90099 045 \*\*\*150.00



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8352 CORAL	DRIVE	8352 CORAL DRIVE					· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
FORT MYERS	5 FL 33912	FORT MYERS FL 33912			ļ			
					DO NOT WR	RITE IN THI	S SPACE	
					<ol><li>Date Incorporated or Qualifed</li></ol>	t		
2. Principal	Place of Business	30 14 77			08/03/1995			
7		2a. Mailing Address			4. FEI Number			Applied For
Suite, Ap	t. #, etc.	Suite, Apt. #, etc.			65-0600729			Not Applicable
2		27 Suite, Apt. #, etc.			5. Certifcate of Status Desired			Additional
City & Sta	ate	City & State				_		Required
3		28			6. Election Campaign Financing		\$5.0	0 May Be
Zip	Country	Zip	Cou	ntrv	Trust Fund Contribution		Adde	d to Fees
25		29	30	,	8. This corporation owes the current year Intangible			_
Name and Address of Current Registered Agent					Personal Property Tax. Yes No.  10. Name and Address of New Registered Agent			No
DAI	LAS, EDWARD A			81 Name	10. Name and Address of New )	Registered	Agent	<del></del>
172	74 SAN CARLOS BLVD #202		1					
172: ET 8	VYERS REACH EL 2004		82 Street		ddress (P.O. Box Number is Not Acceptable)			
rip	MYERS BEACH FL 33931		ŀ	83				
	_		l I	64 City			85 Zip	Code
i. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statut	es the ab	Ne-named con	poration submits this statement for the	<u>FL</u>		
agent la	egistered agent, or both, in the State im familiar with, and accept the obliga	of Florida. Such change was a	uthorized	by the corporati	poration submits this statement for the ion's board of directors. I hereby accep	purpose of	changing it	s registered
agent. ra	and and optimo obliga	dona or, Section 607.0505, FIO	nda Statut	ės.	· · · · · · · · · · · · · · · · · · ·	A tile appoi	minera as i	egistered
J								
IGNATURE	Signature, typed or printed name of registered agen	at and title if applicable. (NOTE						
IGNATURE	Signature, typed or printed name of registered agen OFFICERS AN	at and title if applicable. (NOTE D DIRECTORS	: Registered A	gent signature require		DATE		
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941 367 - 4664 Davime Phone #