

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000069372 (7)

1. Corporation Name

THE SPA AND POOL DEPOT INC.



Principal Place of Business

Mailing Address

3272 WEST HILLSBORO BOULEVARD
DEERFIELD BEACH FL 33442

3272 WEST HILLSBORO BOULEVARD
DEERFIELD BEACH FL 33442

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

HARLEH, ROBERT A
4404 NORTH WEST 67TH WAY
CORAL SPRINGS FL 33067

3. Date Incorporated or Qualified

3a. Date of Last Report

09/08/1995

4. FEI Number

65-0596379

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

10. Name and Address of New Registered Agent

81 Name

ROBERT A. HARLEM

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

3335 PINEWALK DRIVE NORTH

83

APT. 208

84

MARGATE

FL

85

Zip Code

33063

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 (if not applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME HARLEH, ROBERT A
STREET ADDRESS 4404 NORTH WEST 67TH WAY
CITY-STATE-ZIP CORAL SPRINGS FL 33067

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

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CITY-STATE-ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D
1.2 NAME ROBERT A. HARLEM
1.3 STREET ADDRESS 3335 PINEWALK DR. NO., APT. 208
1.4 CITY-STATE-ZIP MARGATE, FL. 33063

☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS

☐ Change ☐ Addition

2.4 CITY-STATE-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS

☐ Change ☐ Addition

3.4 CITY-STATE-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS

☐ Change ☐ Addition

4.4 CITY-STATE-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS

☐ Change ☐ Addition

5.4 CITY-STATE-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS

☐ Change ☐ Addition

6.4 CITY-STATE-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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/6/96

(954) 421-2412

CR2E034 (12/95)