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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000027274 (5)

Country

9. Name and Address of Current Registered Agent

25

1001 NORTH U.S. HIGHWAY ONE

BURLEY, MICHAEL J

SUITE 204 JUPITER FL 33477

MARTIN POOLS, INC.

Principal Place of Business

Mailing Address

2a. Mailing Address

City & State

Suite, Apt. #, etc.

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5275 BABCOCK STREET PALM BAY FL 32905

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

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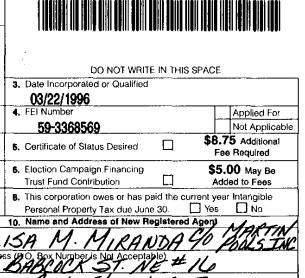
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CITY-ST-ZIP

5275 BABCOCK STREET PALM BAY FL 32905

FILED Jan 16 1998 8:00am Secretary of State



Zip Code

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 title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change PSTD 1.1 TITLE ☐ Addition TITLE MIRANDA, LISA M 1,2 NAME NAME CR2E034 5275 BABCOCK ST. STREET ADDRESS 1.3 STREET ADDRESS PALM BAY FL 32905 CITY-ST-ZIP 1.4 CITY-ST-ZIP ☐ DELET**E** TITLE 2.1 TITLE Change Addition NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE 3.1 TITLE Addition TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY+ST-ZIP 34. CITY-ST-ZIP DELETE Change Addition 41 TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5 1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE Change 6.1 TITLE Addition TITLE NAME 6.3 STREET ADDRESS STREET ADDRESS

14. Thereby certify that the information supplied with this filing 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 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 of 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 other ment with an address.

Country

81 Name

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