

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P96000080333

FILED  
Jan 30, 2008  
Secretary of State

**Entity Name:** PRO POOL AND SPA SERVICE AND REPAIR, INC.

**Current Principal Place of Business:**

4996 SOUTHWEST 95 AVENUE  
COOPER CITY, FL 33328

**New Principal Place of Business:**

**Current Mailing Address:**

4996 SOUTHWEST 95 AVENUE  
COOPER CITY, FL 33328

**New Mailing Address:**

P.O. 290276  
FT. LAUDERDALE, FL 33329

**FEI Number:** 65-0715214

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

AMERILAWYER CHARTERED  
343 ALMERIA AVENUE  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

ANNE, BLOOM  
1484 SW 97 WAY  
DAVIE, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ANNE BLOOM

01/30/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSTD ( ) Delete  
Name: MESSLER, ELIZABETH  
Address: 4996 SOUTHWEST 95 AVENUE  
City-St-Zip: COOPER CITY, FL 33328

Title: VP ( ) Delete  
Name: MESSLER, JACOB  
Address: 4996 SW 95 AVE  
City-St-Zip: COOPER CITY, FL 33328

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JACOB MESSLER

VP

01/30/2008

Electronic Signature of Signing Officer or Director

Date