

4-13-98 B-4538 -C
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000084532 (6)**

1. Corporation Name
FERMAN POOLS INC.



Principal Place of Business 8600 SW 67TH AVE., APT. 928 MIAMI FL 33143	Mailing Address 8600 SW 67TH AVE., APT. 928 MIAMI FL 33143
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 17900 SW 92 CT. Suite, Apt. #, etc. 22 Miami, FL. City & State 23 33157. Zip 24 Country		2a. Mailing Address 26 17900 SW 92 CT. Suite, Apt. #, etc. 27 Miami, FL. City & State 28 33157. Zip 29 Country		3. Date Incorporated or Qualified 10/14/1996	
		4. FEI Number 65-0722953		Applied For <input type="checkbox"/> Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent

**FERMAN, ELIDER E
8600 SW 67TH AVE., APT. 928
MIAMI FL 33143**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 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 officer 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)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	FERMAN, ELIDER E	
STREET ADDRESS	8600 SW 67TH AVE., APT. 928	
CITY-ST-ZIP	MIAMI FL 33143	
TITLE	VPD	<input type="checkbox"/> DELETE
NAME	FERMAN, MARIA P.	
STREET ADDRESS	8600 SW 67 AVE., APT 928	
CITY-ST-ZIP	MIAMI FL	
TITLE	D.	<input type="checkbox"/> DELETE
NAME	Ferman, ELider E.	
STREET ADDRESS	17900 SW 92 CT.	
CITY-ST-ZIP	Miami FL 33157.	
TITLE	VPD.	<input type="checkbox"/> DELETE
NAME	FERMAN, MARIA P.	
STREET ADDRESS	17900 SW 92 CT.	
CITY-ST-ZIP	Miami, FL 33157.	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby 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 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: **ELIDER E. FERMAN** 4/6/98 305 2542173

CR2E034 (10/97)