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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # P96000101357 (7)

AQUA TECH POOLS & SPAS INC.

FILED Mar 23 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address	Mailing Address			+ IEBNIOON 310 10110 B1311 ODAN ODAN OBJEN SIDIN BOIGH HADAD 14101 D1111 1001 1001		
8277 MICHAE	DRIVE	8277 MICHAEL DE	7 MICHAEL DRIVE					
BOYNTON BEACH FL 33437			BOYNTON BEACH FL 33437					
						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified		
						01/01/1997		
	lace of Business	2a. Mailing Addres	SS			4. FEI Number Applied For Not Applied For Not Applied For		
21	N	26]						
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional		
22		27				Fee Required		
City & State	u	City & State				6. Election Campaign Financing \$5.00 May Be		
Zip	Country			notri 4		Trust Fund Contribution		
24	<u></u>	<u>├</u> ─┐ `	—	ли у		8. This corporation owes or has paid the current year Intangible		
[24]	25 9. Name and Address of Curre	29 Pagistered Agent	[30]	·		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent		
					81 Name			
VIGGIANI, JAMES V								
8277 MICHAEL DRIVE				82	Street A	Address (P.O. Box Number is Not Acceptable)		
BOYNTON BEACH FL 33437				63				
	,			63				
				B4	City	85 Zip Code		
						FL `		
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 typod or printed name of registered agent and tricid apyticable (NOTE Registered Agent signature required when reinstating) DATE								
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PRESIDENT	DELE		rle	\neg	Change Addition		
NAME	HAMES J. VIDE/ANI	10	1.2 NA	AME	- 1	1 16		
STREET ADDRESS	8377 MICHAEL PRIV	<i>I</i> =	1351	IRFET A	DORESS	NONE		
CITY-ST-7IP	BOYNTON BEACH FL.	33437		TY-ST-		, ,		
TITLE	VICE POESIDENT	DELE			***	Change Addition		
NAME	PANIEL SARACEND		2 2 NA					
STREET ADDRESS	1105 S.W. 13th D	RIVE			DDRESS			
CITY-ST-ZIP	BUCA RAYON FL	. 33486		ITY-ST				
TITLE	 ,	DELE			· · · ·	Change Addition		
NAME			3.2 NA		- 1	Contrage (Addition		
STREET ADDRESS					DDRESS			
CITY-ST-ZIP				ITY-ST				
TITLE		DELE			EII I	Change Addition		
NAME			4.2 N		- 1			
STREET ADDRESS					DDRESS			
CHTY-ST-ZIP				TY-ST-				
THILE		DELE			ZIF	Change Addition		
NAME		U DELL	5.2 NA			. — Change — Auditeit		
STREET ADDRESS			1		DDRESS			
CITY-ST-ZIP TITLE		DELE		1Y-ST-	ZIP	Change Addition		
		L., DELE				LI Grange LI Addition		
NAME			62 NA					
STREET ADDRESS					DDRESS	·		
CITY-ST-ZIP	- 		6.4 Cil	TY-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 arrural report or supplemental angual 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 order in the property of the corporation of the receiver of the r

SIGNATURE:

3/6/20