

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 14, 2001 8:00 am
Secretary of State

02-14-2001 90005 005 ***150.00

0260334

DOCUMENT # P97000018121

1. Entity Name

STAR BRITE POOL SERVICE, INC.

Principal Place of Business

1700 S.E. 15TH STREET, 110
 FT. LAUDERDALE FL 33316

Mailing Address

1700 S.E. 15TH STREET, 110
 FT. LAUDERDALE FL 33316

2. Principal Place of Business

4630 NW UNIVERSITY
 Suite, Apt. #, etc.
 4020

3. Mailing Address

4630 NW UNIVERSITY DR
 Suite, Apt. #, etc.
 4020

City & State

CORAL SPRINGS FLA.

City & State

CORAL SPRINGS FLA.

Zip

33067

Country

BROWARD

Zip

33067

Country

BROWARD



920347

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0728051

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

ESCHBACH, JAMES J
 1700 S.E. 15TH STREET, 110
 FT. LAUDERDALE FL 33316

7. Name and Address of New Registered Agent

Name
 ESCHBACH, JAMES J.
 Street Address (P.O. Box Number is Not Acceptable)
 4166 NW 90th AVE
 APT 105
 City
 CORAL SPRINGS FL Zip Code
 33065

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 D
 ESCHBACH, JAMES J
 1700 S.E. 15TH STREET, 110
 FT. LAUDERDALE FL 33316 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 D
 ESCHBACH, JAMES J.
 4166 NW 90th AVE
 APT #105 CORAL SPRINGS FL
 33065 ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

James J. Eschbach
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-12-2001 - 954-522-5003
 Date Daytime Phone #

CR2E034 (10/00)