

APPROVED  
AND  
FILED

Pg 1a17

### 1. Entity Name


**DOLPHIN POOL MAINTENANCE, INC.**

00 JUL 24 PM 2:34

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

[illegible]

DO NOT WRITE IN THIS SPACE

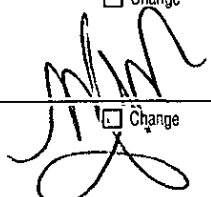
2. Principal Place of Business		3. Mailing Address		 DO NOT WRITE IN THIS SPACE		
Suite, Apt. #, etc.		Suite, Apt. #, etc.				
City & State		City & State		4. FEI Number	65-0739975	Applied For
Zip		Country				Not Applicable
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent	
MARKOWITZ, RONALD 6751 CODY STREET HOLLYWOOD FL 33024	Name	
	Street Address (P.O. Box Number is Not Acceptable)	
	City	FL Zip Code

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

<p>9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input checked="" type="checkbox"/> (See criteria on back)</p>	<p><b>FILE NOW!!! FEE IS \$550.00</b>  <b>After SEPTEMBER 13, 2000 Min. will be \$750.00</b>  <b>Make Check Payable to Department of State</b></p>	<p>10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b></p>
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <b>P</b> <b>MARKOWITZ, RONALD</b> <b>6751 CODY STREET</b> <b>HOLLYWOOD FL 33024</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: RONALD H. MARKOWITZ 7/18/60 966-0103  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/00)

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DOLPHIN POOL MAINTENANCE, INC.

P. O. Box 848385  
Pembroke Pines, Fl. 333084  
(954) 966-0103

July 18, 2000

To Whom It May Concern:

On or about April 1, 2000, check #1377 from Dolphin Pool Maintenance, Inc., in the amount of \$150.00, was mailed to the Florida Division of Corporations along with the year 2000 Uniform Business Report. As of yet that check has not been cashed.

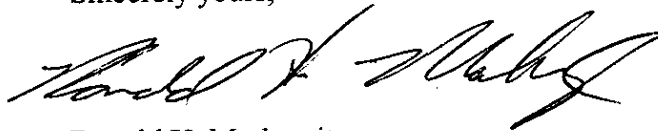
This is the second time in two years that we have had a problem with this. The first time (1999) the report was not mailed to our correct address. This year it was mailed back to you by our company one month prior to the deadline, but as of July 17<sup>th</sup> you claim it has never been received.

We respectfully request that the late fee be waived and no dissolution of corporation forms be filed.

From now on all checks and reports will be mailed back by registered mail to avoid any problems in the future.

We appreciate your understanding and cooperation in this matter.

Sincerely yours,



Ronald H. Markowitz  
President