Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000048439

1. Corporation Name

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

GOLD STAR POOLS, INC.

Principal Place of Business	Mailing Address	
5700 DEWEY STREET	5700 DEWEY STREET	
HOLLYWOOD FL 33023	HOLLYWOOD FL 33023	

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2a. Mailing Address

City & State

Suite, Apt. #, etc.

FILED Apr 02, 1999 8:00 am Secretary of State

04-02-1999 90014 046 ***150.00



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed

06/01/1998 4. FEI Number

65-0960906

5. Certifcate of Status Desired

6. Election Campaign Financing

23		28				Trust Fund Contribution		Added to	Fees		
Zip	Country	Zip	Zip Coun			8. This corporation owes the o	current year Inta		_		
24	25	29	30			Personal Property Tax.		<i>T</i>	□No		
•	9. Name and Address of Current	Registered Agent	t			10. Name and Address of Ner	w Registered /	Agent			
	E41 -114E0 E			81	Name						
GREEN, JAMES F 5700 DEWEY STREET				82	82 Street Address (P.O. Box Number is Not Acceptable)						
HOLLYWOOD FL 33023											
				84	Citv			85 Zip C	ode		
	•			1-1	•		FL	<u> </u>			
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	•						DATE				
12.	Signature, typed or printed name of registered agent OFFICERS AND			tered Agent	t signature required	when reinstating) ADDITIONS/CHANGES TO		D DIRECTOR	RS IN 12		
TITLE	D OFFICERS AND		-	1.1 TITLE		ADDITIONOS DIVINGES TO	9,	Change	Addition		
NAME	GREEN, JAMES F			1.2 NAME							
STREET ADDRESS	CTAG DELECT OTDEET			1.3 STREET	ADORESS						
CITY-ST-ZIP	HOLLYWOOD FL 33023			1.4 CITY-ST					- {		
TITLE	TIOLET WOOD TE GOOLS			2.1 TITLE				Change	Addition		
NAME				2.2 NAME							
STREET ADDRESS				2.3 STREET	ADDRESS						
CITY-ST-ZIP				2. 4 CITY-S	T-ZIP				i		
-TITLE	The second secon			3.1 TITLE -				-, Change	☐ Addition		
NAME			:	3.2 NAME							
STREET ADDRESS	}		:	3.3 STREET	ADDRESS				ļ		
CITY-ST-ZIP			:	3.4. CITY-S	T-ZIP						
TITLE			DELETE	4.1 TITLE				Change	☐ Addition]		
NAME	1			4. 2 NAME		•					
STREET ADDRESS				4.3 STREET	ADDRESS						
CITY-ST-ZIP				4.4 CITY-ST	r-ZIP						
TITLE				5.1 TITLE				☐ Change	☐ Addition		
NAME				5.2 NAME							
STREET ADDRESS				5.3 STREET	ADDRESS						
CITY-ST-ZIP				5.4 CITY-ST	T-ZIP						
TITLE			DELET.C	6.1 TITLE				Change	☐ Addition		
NAME			1	6.2 NAME							
STREET ADDRESS			1	6.3 STREET							
CITY-ST-ZIP				6.4 CITY-ST		2 440 07/0V/0 El-24 CV 1 2		if, that the !-	formation		
14. I hereby	certify that the information supplied with	h this filing does no	ot qualify for the	exemption	on stated in Si	ection 119.07(3)(i), Florida Statute shall have the same legal effect a	es. I further cert	illy that the in	am an		

reported on this annual report of supplemental annual report is true and accurate and that my signature shall have the same regardenests in made under our fifter 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, with all other like empowered.

SIGNATURE: