PROFIT CORPORATION --ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## FILED Jul 06, 1999 8:00 am Secretary of State

07-06-1999 90003 019 \*\*\*150.00 09-13-1999 90003 045 \*\*\*400 00

DOCU	IMENT # P980000	068966			(
PARADISE POOLS SERVICE & EQUIPMENT INC.					
1	.02 1 0020 0202 0 220.				O ARDINA BEL NIO TATORA TANIO ARDINA BELINA ORANA ORANA ORANA ARDINA REGINA DI ARA
ļ.					
Principal Pla	ce of Business	Mailing Address			4 (ablitates tria tibrita tillitt abellt abellt anter anter atten tatte mitte berte anter
5737 WHISTLEWOOD CIRCLE 5737 WHISTLEWOOD CIRCLE					
SARASOTA FI	l. 34232	SARASOTA FL 34232			DO NOT WRITE IN THIS SPACE
·					3. Date Incorporated or Qualifed
ļ		,			08/03/1998
Principal Place of Business     2a. Mailing Address					4. FEI Number · Applied For
23 5251 AShTON RD 28 SAME				<u>.</u> .	65 - 0856 051 Not Applicable
Suite, Apt. #, etc					5. Cërlifcate of Statús Desired
22 27 29 20 20 20 20 20 20 20 20 20 20 20 20 20					
	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
23 SALASCITCE F LORIDG 28 Zip Country Zip Country				<del></del>	8. This corporation owes the current year intangible
24 342	33 ISAKASOTO	29 3	30		Personal Property Tax. Yes No
	9. Name and Address of Current	Registered Agent	-	1	10. Name and Address of New Registered Agent
DET	DADD DECIMALD		81	Name	<del>18</del>
BEDARD, REGINALD 5737 WHISTLEWOOD CIRCLE 82 Stre				Street	et Address (P.O. Box Number is Not Acceptable)
SARASOTA FL 34232				<del>                                     </del>	
			83		
			84	City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	s, the above	a-named	ed corporation submits this statement for the purpose of changing its registered
office of	registered agent, or both, in the State of am familiar with, and accept the obligation	/ Florida, Such change was aut ons of, Section 607,0505, Florid	thorized by da Statules	the corp	ed corporation submits this statement for the purpose of changing its registered reporation's board of directors. I hereby accept the appointment as registered
SIGNATURE		,			
	Signature, typed or printed name of registered agent is	,		d signatura	re required when reinstating) DATE
12.	OFFICERS AND	DELETE	13. 1.1 TITLE	<del></del> -	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME	1		1.2 NAME		
STREET ADDRESS			I.	ADDRESS	Reginald BEDARD 5251 ASHRON RD
CITY-ST-ZIP			1.4 CTY-S	1-ZIP	SARASOTA FLORIDA 34233
TITLE		( DELETE	2.1 TITLE		☐ Change ☐ Additio
NAME			2.2 NAME		marsonie ANN Bedaro
STREET ADDRESS	s,		2.3 STREET	ADDRESS	5251 ASHTON RD
City-ST-ZIP			2.4 CITY-5	T-ZIP	SAGASOTA FT 34233
tine		□ DELÉTÉ	3.1 TITLE		School Change Adduction
NAME			3.3 STREET	4000FC0	
STREET ADDRESS	6		3.4. CITY -S		8
CITY-S1-ZEP		DELETE	4.1 TITLE	-	V.P Addition
NAME			4, 2 NAME		STEVE MAGGLEGOR
STREET ADDRESS	3		4.3 STREET	ADDRESS	
CITY-ST-ZIP			4.4 CITY-S1	r-ZIP	SAMOSOTO FL 34233
TITLE		☐ DELETE	5.1 TITLE	,	Change Addition
NAME			5.2 NAME	1000-0-	
STREET ADDRESS	1		5.3 STREET 5.4 CITY-S1		· ·
TITLE		☐ OELETE	6.1 TITLE		☐ Change ☐ Additio
TITLE NAME	1	المام	6.2 NAME		
STREET ADDRESS		•	6.3 STREET	ADDRESS	ss
OTY OT 70	1		64 CITY-SI		

14. I hereby certify that the information supplied with this fitting 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, with all other like empowered.

SIGNATURE: P. DIOSPONTORE RECULUPEDA BEDORO June 28-99 (941-926-965)

3RZE034 (11/98)