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 # P98000100240

TOTAL POOL WORKS, INC.

Mailing Address Principal Place of Business 5513 N.W. 41ST AVE. 5513 N.W. 41ST AVE. COCONUT CREEK FL 33073 COCONUT CREEK FL 33073 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 11/25/1998 2a. Mailing Address Applied For 2. Principal Place of Business 4. FEI Number 65-0879615 Not Applicable 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt, #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Zip Country Zip 8. This corporation owes the current year Intangible Personal Property Tax. 30 24 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Sean Bandel BANDEL, SEAN Street Address (P.O. Box Number is Not Acceptable) 5513 Nw 41 AVE. 82 5513 N.W. 41ST AVE. **COCONUT CREEK FL 33073** 83 City Co Conut Creek Zip Code 33073 85 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 CR2E034.(4.1/98) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ Change DELETE 1.1 TITLE TITLE Lauren Bandel BANDEL, SEAN 12 NAME NAME 5513 NW 41 AVE. 5513 N.W. 41ST AVE. 1.3 STREET ADORESS STREET ADDRES CoConut Creek, Fla. 33073 COCONUT CREEK FL 33073 CITY-ST-ZIP 1.4 CITY-ST-ZIP Addition DELETE ☐ Change 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change ☐ Addition 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP ☐ Change ☐ Addition □ DELETE 51TMF TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP

CITY-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 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.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

DELETE

CITY-ST-ZIP

STREET ADDRESS

NAME

☐ Change

Addition

Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90184 020 ***150.00