2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P99000061562 **DOCUMENT #**

1. Entity Name



Mar 13, 2003 8:00 am \$\frac{3}{2}\$

Secretary of State **FILED**

03-13-2003 90051 040 ***150.00

MAJESTIC POOL SUPPLIES, INC.							
Principal Place of Business Mailing Address 3161 W. DAVIE BLVD. FT. LAUDERDALE FL 33312 FT. LAUDERDALE FL 3331		3312					
2. Principal Place of Business 3. Mailing Addr		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING (CHANGES	
City & State		City & State			4. FEI Number 65-0937319		oplied For
Zip	Country	Zip	Coun	ntry		8.75 Add	ditional
<u> </u>	6. Name and Address of Curre	ent Registered Agent			7. Name and Address of New Registered Ag	jent	
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GREENE, WILLIAM				Street Address ((P.O. Box Number is Not Acceptable)		
11450 W	. SAMPLE ROAD				,		
CORAL S	SPRINGS FL 33065			1			
				City	FL	Zip Cod	e
6 Th t - h -		1 6 - 1	ta vaniatas	d office or register	red agent, or both, in the State of Florida. I am fa	milior with	and accept
	ations of registered agent.	tion the purpose of changing i	ita registeri	ea chies of register	red agent, or boat, in the ciate of Florida. Fairma	Times Tricing	ans accept
SIGNATURE	Signature, typed or printed name of registered ag	and title if published.	OTE: Begistere	d Agent signature required	d when reinstating) DATE	······································	
	Signature, typed or printed name of registered agr	ent and title it applicable. (NC	LE: Hegistere	a Agent signature required	o where reinstating)		
	FILE NOW!!! FEE IS \$150.00				9. Election Campaign Financing	\$5.0	May Be
	er May 1, 2003 Fee will be \$550.0 k Payable to Florida Department				Trust Fund Contribution.		d to Fees
	-	ND DIRECTORS	11.		ADDITIONS/CHANGES TO OFFICERS AND I	DIRECTOR	S IN 11
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12. 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 eceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an axiachment with an address. The all other like empowered.

SIGNATURE: