

2000 UNIFORM BUSINESS REPORT (UBR)

1/

FILED
May 01, 2000 8:00 am
Secretary of State

01-26-2000 90042 015 ***150.00

DOCUMENT # P99000077302

1. Entity Name

SEAN'S POOLS, INC.

Principal Place of Business

330 NW 41ST WAY
DEERFIELD BEACH FL 33442

Mailing Address

330 NW 41ST WAY
DEERFIELD BEACH FL 33442-8052

330 NW 41ST WAY



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Deerfield Beach FL

3. Mailing Address

Suite, Apt. #, etc.

33442

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0946883

Applied For

Not Applicable

Zip

Country

US

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SYKES, WILLIAM S
330 NW 41ST WAY
DEERFIELD BEACH FL 33442**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible

Tax filing requirement and elects to do so.
(See criteria on back)

☐

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PRESIDENT** ☐ Delete
NAME **SEAN SYKES**
STREET ADDRESS **330 NW 41 WAY Deerfield Beach**
CITY-ST-ZIP **FL 33442** ☐ Delete

TITLE ☐ Delete
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CITY-ST-ZIP ☐ Change ☐ Addition

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:

Sean Sykes

Sean Sykes

1/23/00

954.899.7321

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #