2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P99000093441 MARK'S AUTOMATED POOL SYSTEMS, INC.

FILED May 11, 2001 8:00 am Secretary of State

WATER O NOTONIANES I GOE GIGIENIO, ING.							05-11-2001 90297 032 ***150.00					
·	ce of Busines	s	Mailing Address									
505 RANCHERO ST. PRLANDO FL 32822			7505 RANCHERO ST. ORLANDO FL 32822									
Principal Place of Business 3. Mailing Address												
Suite, Apt. #, etc.			Suite, Apt. #, etc.					DO NOT WE	RITE IN THIS	S SPACE		
City & State			City & State			4. F	El Number	59-33881	23		pplied For ot Applicable	
Zip Country			Zip Country			5. 0	Certificate of S	Status Desired		\$8.75 Ad	ditional	
6. Name and Address of Current Registere			egistered Agent				lame and Ad	ldress of New	Registered	d Agent		
WEOOFL MARK F					Name							
WESSEL, MARK E 7505 RANCHERO ST. ORLANDO FL 32822					Street Add	dress (P.O. B	ox Number is	Not Acceptat	ole)			
0112					City			is T	F	Zip Cod	le	
		y submits this statement for								<u>- </u>		
SIGNATURE	Signature, typed	or printed name of registered agent an	d title if applicable. (NOTE	:: Registere	d Agent signature	required when rei	instating)		DATE			
Tax filing requirement and elects to do so. After MAY 1, 20				!! FEE IS \$150.00 01 Fee will be \$550.00 le to Department of State			10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.					
11.	· · · · · · · · · · · · · · · · · · ·	OFFICERS AND D	IRECTORS	12.	Ţ	ADI	DITIONS/CH	ANGES TO OF	FICERS AN			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Mark e Ichero St OFL 32822	□ Delete							☐ Change	☐ Addition	
TITLE IAME	VD WESSEL,	DEBORAH S	☐ Delete	TITLE NAM		*				☐ Change	☐ Addition	
ith le i Address - City-St-Zip		CHERO ST FL 32822			-ST-ZIP							
ITLE IAME TREET ADDRESS BITY-ST-ZIP			☐ Delete							Change	Addition	
ITLE NAME TREET ADDRESS OTY-ST-ZIP			☐ Delete							☐ Change	☐ Addition	
ITLE IAME TREET ADDRESS ITY-ST-ZIP			□ Delete	TITLE NAMI STRE			· · · · · · · · · · · · · · · · · · ·			☐ Change	Addition	
ITLE AME TREET ADDRESS ITY-ST-ZIP			☐ Delete	TITLE NAMI STRE	:					☐ 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.