2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED May 02, 2001 8:00 am Secretary of State DOCUMENT # **P99000096125** GLORIOSO'S POOL SERVICE INC. 05-02-2001 90069 041 ***150.00 Principal Place of Business Mailing Address 279 DEER CREEK BLVD., #1106 279 DEER CREEK BLVD., #1106 DEERFIELD BCH FL 33442 DEERFIELD BCH FL 33442 B0043813 2. Principal Place of Business 3. Mailing Address 279 DEERCREEK BLUD 979 DEER CRECK BLVD. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 4 1106 1106 Applied For 4. FEI Number City & State City & State 65-0970492 EERTIELD BO Not Applicable Country U ≤ A 5. Certificate of Status Desired \$8.75 Additional Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent GLORIOSO, DARREN Street Address (P.O.-Box Number is Not Acceptable) 279 DEER CREEK BLVD., #1106 **DEERFIELD BCH FL 33442** Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5,00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME GLORIOSO, DARREN NAME STREET ADDRESS STREET ADDRESS 279 DEER CREEK BLVD., #1106 CITY-ST-ZIP CITY-ST-ZIP **DEERFIELD BCH FL 33442** ☐ Addition ☐ Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 the empowered.

ARREN GLORIOSO 4/25/01