FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN -8 AM 10:23

DOCUMENT # V20023 (0)

1. Corporation Name
OLYMPIC POOL PLASTER CORP.

Principal Place of Business	Mailing Address
3451 N.E. 11TH AVENUE #7 OAKLAND PARK FL 33334	3451 N.E. 11TH AVENUE #7 OAKLAND PARK FL 33334

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/09/1992
3a. Date of Last Report: 08/05/1994

2. Principal Place of Business
21 5200 N. FEDERAL HWY
Suite, Apt. #, etc.
22 SUITE 1067
City & State
23 FT. LAUDERDALE
Zip 24 33308 Country 25 BROWARD

2a. Mailing Address
26 5200 N. FEDERAL HWY
Suite, Apt. #, etc.
27 SUITE 1067
City & State
28 FT. LAUDERDALE
Zip 29 33308 Country 30 BROWARD

4. FEI Number: 65-0316430 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

PIGAKIS, HELEN
3451 N.E. 11TH AVENUE
#7
OAKLAND PARK FL 33334

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 3488 N.E. 19 AV.
83
84 City OAKLAND PK FL 85 Zip Code 33306

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: Helen Pigakis HELEN PIGAKIS 6-3-95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	V	11 TITLE	P ☒ Change ☐ Addition
NAME	PIGAKIS, ZAHARIAS	12 NAME	PIGAKIS, ZAHARIAS
STREET ADDRESS	3451 NE 11 AVE., #7	13 STREET ADDRESS	3488 N.E. 19 AVE
CITY ST ZIP	OAKLAND PARK FL 33334	14 CITY ST ZIP	OAKLAND PARK, FL. 33306
TITLE	P	21 TITLE	T ☒ Change ☐ Addition
NAME	PIGAKIS, HELEN	22 NAME	PIGAKIS, HELEN
STREET ADDRESS	3451 NE 11 AVE., #7	23 STREET ADDRESS	3488 N.E. 19 AVE
CITY ST ZIP	OAKLAND PARK FL 33334	24 CITY ST ZIP	OAKLAND PARK, FL. 33306
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY ST ZIP		34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: Helen Pigakis HELEN PIGAKIS 6-3-95 (305)565-9740
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0230892 CP