2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# V53696

Title:

Name:

Address:

City-St-Zip:

VΡ

HILL, JOHN

(X) Delete

6120 14TH PLACE SOUTH

WEST PALM BEACH, FL 33415

FILED Sep 12, 2006 Secretary of State

Entity Nar	me: PERFEC	FPOOL FILLS INC.		•	
Current Principal Place of Business:			New Principal Place	of Business:	
	DIXIE HWY N, FL 32958	US			
Current Mailing Address:			New Mailing Address:		
P O BOX 1 ROSELAN	60 D, FL 32957	US			
FEI Number:	65-0348385	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
13692 OLD SEBASTIA	ER, DONALD DIXIE HWY N, FL 32958	US			
	named entity s of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE:				
	Electron	ic Signature of Registered Ago	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () SHELHAMER, D 13692 OLD DIX SEBASTIAN, FL	IE HWY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TSD () SHELHAMER, V 13692 OLD DIX SEBASTIAN, FL	IE HWY	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: VIRGINIA SHELHAMER TSD 09/12/2006

() Change () Addition