

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Dorinda B. Northington
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V54406**

(6)

1. Corporation Name

SOUTH COAST POOLS, INC.

2. Principal Place of Business

% ROBERT B. FOGLE
141 NE 30 CT
WILTON MANORS FL 33334

3. Mailing Address

% ROBERT B. FOGLE
141 NE 30 CT
WILTON MANORS FL 33334

(DO NOT WRITE IN THIS SPACE)

3. Date Incorporated or Reorganized	3a. Date of Last Report
07/27/1992	08/17/1994
4. FIC Number	Applied For
65-0345628	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 ad valorem tax under Chapter 199, Florida Statutes	Yes ☐ No ☐

2. Principal Place of Business

21. State Apt. # etc.

22. City & State

23. Zip

24. Name

2a. Mailing Address

26. State Apt. # etc.

27. City & State

28. Zip

29. Name

30. Name

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FOGLE, ROBERT B.
141 NE 30 CT
WILTON MANORS FL 33334

81. Name	85. Zip Code
82. Street Address (P.O. Box Number or Mail Acceptable)	FL
83. City	

11. I, the undersigned, the person(s) designated by the 1991 and 1992 Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office as provided for in both of the above cited Florida Statutes. Such change was authorized by the corporation's board of directors, thereby accepting the appointment as registered agent. I am hereby accepting the appointment as registered agent under Florida Statutes.

Signature of

(Print Name and Address of Registered Agent)

(Print Name and Address of Registered Agent)

At:

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
NAME: FOGLE, ROBERT B. ADDRESS: 141 NE 30 CT CITY: WILTON MANORS FL	1. NAME: ☐ Change ☐ Addition
	2. NAME: ☐ Change ☐ Addition
	3. NAME: ☐ Change ☐ Addition
	4. NAME: ☐ Change ☐ Addition
	5. NAME: ☐ Change ☐ Addition
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	12. NAME: ☐ Change ☐ Addition
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	17. NAME: ☐ Change ☐ Addition
	18. NAME: ☐ Change ☐ Addition
	19. NAME: ☐ Change ☐ Addition
	20. NAME: ☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and is true and correct, for the reasons stated in Law No. 199-107, Chapter 199, Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and correct and that my signature shall have the same legal effect and I make under oath that I am an officer or director of the corporation or the person or persons empowered to execute this report as required by Chapter 199, Florida Statutes, and that my name appears in Block 12 of Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Robert B. Fogle Robert B. Fogle
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortman
Secretary of State
(305) 371-0000 (TDD) (305) 371-0000

APPROVED
AND
FILED

55 MAY 20 AM 10:15

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V54572** (5)

1. Corporation Name

J.A. BUZZELLA, INC.

2. Principal Place of Business

**8050 SW 138TH STREET
MIAMI FL 33158
US**

3a. Mailing Address

**P.O. BOX 160324
MIAMI FL 33116
US**

DO NOT WRITE IN THIS SPACE

3. Date of Registration or Qualification

07/31/1992

3a. Date of Last Report

03/11/1994

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

65-0350699

Applied For

Not Applicable

22. State Agent Name

27. State Agent Name

23. City & State

28. City & State

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

24. Zip

25. Country

29. Zip

30. Country

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.035,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**BUZZELLA, JAMES A.
8050 SW 138TH ST
MIAMI FL 33158**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.07(2) 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 607.07(2), Florida Statutes.

SIGNATURE

12. Signature of person who has been appointed as the registered agent

13. Signature of person who has been appointed as the registered agent

14. Signature

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (IN 12)

14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (IN 12)

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51. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (IN 12)

52. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (IN 12)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER (OFFICER OR DIRECTOR)

JAMES A. BUZZELLA SR

5-8-95 (305) 253-6022