2008 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Nov 20, 2008
Secretary of State

DOCUMENT# P07000071472

Entity Name: O2 POOL SERVICE & REPAIR, INC

Current Principal Place of Business:

6000 PALM TRACE LANDING DR
301 BLDG 13
DAVIE, FL 33314

New Principal Place of Business:

20803 NW ,1 ST
PEMBROKE PINES, FL 33029

Current Mailing Address:

6000 PALM TRACE LANDING DR
301 BLDG 13
DAVIE, FL 33314

New Mailing Address:

14359 MIRAMAR PRWKY
232
MIRAMAR, FL 33027

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ESCALONA, OSCAR
6000 PALM TRACE LANDING DR
301 BLDG 13
DAVIE, FL 33314 US

Name and Address of New Registered Agent:

ESCALONA, OSCAR
20803 NW , 1 ST
PEMBROKE PINES, FL 33029 US

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: OSCAR ESCALONA 11/20/2008
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: ESCALONA, OSCAE
Address: 6000 PALM TRACE LANDING DR-#301 BLDG 13
City-St-Zip: DAVIE, FL 33314

Title: VPD ( ) Delete
Name: YANEZ, OSWALDO
Address: 6000 PALM TRACE LANDING DR-#301 BLDG 13
City-St-Zip: DAVIE, FL 33314

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: ESCALONA, OSCAR E
Address: 20803 NW , 1 ST
City-St-Zip: PEMBROKE PINES, FL 333029

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: OSCAR ESCALONA PD 11/20/2008
Electronic Signature of Signing Officer or Director Date