

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000009729

**Entity Name:** PARADISE POOL MANAGEMENT LLC

**Current Principal Place of Business:**

4722 SE 17TH AVENUE  
#233  
CAPE CORAL, FL 33910

**Current Mailing Address:**

4722 SE 17TH AVENUE  
#233  
CAPE CORAL, FL 33910

**FEI Number: 81-4948280**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

MARIN, RONALD  
11996 TULIO WAY  
APT 2306  
FORT MYERS, FL 33912 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGR  
Name MARIN, RONALD  
Address 11996 TULIO WAY, APT 2306  
City-State-Zip: FORT MYERS FL 33912

Title AR  
Name MURILLO, ANA  
Address 11996 TULIO WAY, APT 2306  
City-State-Zip: FORT MYERS FL 33912

Title AR  
Name MARIN, DANIEL  
Address 11996 TULIO WAY, APT 2306  
City-State-Zip: FORT MYERS FL 33912

Title AR  
Name MARIN, JUAN JOSE  
Address 11996 TULIO WAY, APT 2306  
City-State-Zip: FORT MYERS FL 33912

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: RONALD MARIN**

**OWNET**

**01/16/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date