

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000071472

FILED  
May 01, 2009  
Secretary of State

Entity Name: O2 POOL SERVICE & REPAIR, INC

**Current Principal Place of Business:**

20803 NW , 1 ST  
PEMBROKE PINES, FL 33029

**New Principal Place of Business:**

**Current Mailing Address:**

14359 MIRAMAR PRWKY  
232  
MIRAMAR, FL 33027

**New Mailing Address:**

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

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

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

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

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

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, OSCAR E  
Address:                      20803 NW , 1 ST  
City-St-Zip:                      PEMBROKE PINES, FL 333029

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

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

05/01/2009

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date