## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 672598**

City-St-Zip:

TAMARAC, FL 33321

Entity Name: A-1 AQUATIC SYSTEMS, INC.

FILED Jan 06, 2008 Secretary of State

| Current P                                   | rincipal Place                                      | e of Business:                   | New Principal Place of Business:            |                                        |
|---------------------------------------------|-----------------------------------------------------|----------------------------------|---------------------------------------------|----------------------------------------|
|                                             | 73RD AVE<br>C, FL 33321                             |                                  |                                             |                                        |
| Current Mailing Address:                    |                                                     |                                  | New Mailing Address:                        |                                        |
|                                             | 73RD AVE<br>C, FL 33321                             |                                  |                                             |                                        |
| FEI Number                                  | : 59-2002930                                        | FEI Number Applied For()         | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )      |
| Name and                                    | Address of (                                        | Current Registered Agent:        | Name and Address o                          | f New Registered Agent:                |
| 540 NE 4Ť                                   | PETER J.<br>TH STREET<br>JDERDALE, F                | L 33301 US                       |                                             |                                        |
|                                             | named entity<br>e of Florida.                       | submits this statement for the p | ourpose of changing its registered          | d office or registered agent, or both, |
| SIGNATUI                                    | RE:                                                 |                                  |                                             |                                        |
|                                             | Electro                                             | nic Signature of Registered Age  | ent                                         | Date                                   |
| Election Ca                                 | mpaign Financin                                     | g Trust Fund Contribution ( ).   |                                             |                                        |
| OFFICERS AND DIRECTORS:                     |                                                     |                                  | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS |                                        |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | P (<br>LIEBMAN, HEN<br>8107 NW 73RI<br>TAMARAC, FL  | D AVE                            | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | SD (<br>LIEBMAN, JAN<br>8107 NW 73 A<br>TAMARAC, FL | VE                               | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | VD (<br>LIEBMAN, CAT<br>8107 NW 73 A<br>TAMARAC, FL | VE                               | Title:<br>Name:<br>Address:<br>City-St-Zip: | ()Change ()Addition                    |
| Title:<br>Name:<br>Address:                 | TD (<br>LIEBMAN, JAN<br>8107 NW 73RI                |                                  | Title:<br>Name:<br>Address:                 | ( ) Change ( ) Addition                |

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.

City-St-Zip:

SIGNATURE: HENRY LIEBMAN Ρ 01/06/2008