

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000002574

FILED
Mar 19, 2009
Secretary of State

Entity Name: AQUATRON WORLDWIDE, INC.

Current Principal Place of Business:

25 RUTGERS AVE
CEDAR GROVE, NJ 07009

New Principal Place of Business:

Current Mailing Address:

601 N CONGRESS AVE
BLDG. 3 SUITE 308
DELRAY BEACH, FL 334454639 US

New Mailing Address:

FEI Number: 35-2176813 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: PORAT, JOSEPH
Address: 532 COMMODORE DR
City-St-Zip: DELRAY BEACH, FL 33483

Title: P () Delete
Name: PORAT, TOMER
Address: 2934 NEEDHAM COURT
City-St-Zip: DELRAY BEACH, FL 33445

Title: VP () Delete
Name: PORAT, OMRY
Address: 2974 NEEDHAM COURT
City-St-Zip: DELRAY BEACH, FL 33445

Title: S () Delete
Name: MCCLARNON, KATHLEEN
Address: 256 CENTER STREET
City-St-Zip: PEARL RIVER, NY 10965

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: T LAMBERT

_____ Electronic Signature of Signing Officer or Director

MGR

03/19/2009

_____ Date