

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000130897

Entity Name: AQUATURIS, INC.

FILED
May 01, 2006
Secretary of State

Current Principal Place of Business:

531 LAKEFRONT BLVD
WINTER PARK, FL 32789

New Principal Place of Business:

28 NORTH MAIN STREET
WINTER GARDEN, FL 34787

Current Mailing Address:

531 LAKEFRONT BLVD
WINTER PARK, FL 32789

New Mailing Address:

POST OFFICE BOX 25
OAKLAND, FL 347600025

FEI Number: 51-0439056

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOOVER, PIERCE
531 LAKEFRONT BLVD
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

DEFELICE, CHRISTOPHER
14 WEST VICK STREET
OAKLAND, FL 347600025 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: CHRISTOPHER DEFELICE

05/01/2006

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: D () Delete
Name: HOOVER, PIERCE
Address: 531 LAKEFRONT BLVD
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: DEFELICE, CHRISTOPHER J
Address: 14 W VICK STREET
City-St-Zip: ORLANDO, FL 34760

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVP (X) Change () Addition
Name: HOOVER, PIERCE
Address: 531 LAKEFRONT BLVD
City-St-Zip: WINTER PARK, FL 32789

Title: DP (X) Change () Addition
Name: DEFELICE, CHRISTOPHER J
Address: 17041 ARROWHEAD BLVD
City-St-Zip: WINTER GARDEN, FL 34787

Title: S () Change (X) Addition
Name: HOOVER, JEANETTE
Address: 531 LAKEFRONT BLVD
City-St-Zip: WINTER PARK, FL 32789

Title: T () Change (X) Addition
Name: DEFELICE, TERESA
Address: 17041 ARROWHEAD BLVD
City-St-Zip: WINTER GARDEN, FL 34787

I hereby certify that the information supplied with this filing does not qualify for the 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: CHRISTOPHER DE FELICE

DP

05/01/2006

Electronic Signature of Signing Officer or Director

Date