


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

**FILED
Mar 24, 2005 08:00 AM
Secretary of State**

DOCUMENT # P03000146914
1. Entity Name
ACQUA INVESTMENT GROUP, INC.



Principal Place of Business: 10520 NW 26 STREET, SUITE C 201, MIAMI, FL 33172
Mailing Address: 10520 NW 26 STREET, SUITE C 201, MIAMI, FL 33172

DO NOT WRITE IN THIS SPACE



03212005 No Chg-P CR2E034 (10/03)

4. FEI Number: 20-1411444 Applied For: Not Applicable
5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
CABANAS, JOSEPH
10520 NW 26 STREET
SUITE C 201
MIAMI, FL 33172

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.
SIGNATURE: _____ DATE: _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	ACQUAVELLA, NICOLAS
STREET ADDRESS	10520 NW 26 STREET #C 201
CITY-ST-ZIP	MIAMI, FL 33172
TITLE	V
NAME	ANITA CECILIA PESANTES DE ACQUAVELLA
STREET ADDRESS	10520 NW 26 STREET #C 201
CITY-ST-ZIP	MIAMI, FL 33172
TITLE	T
NAME	PESANTES, NICOLAS A
STREET ADDRESS	10520 NW 26 STREET #C 201
CITY-ST-ZIP	MIAMI, FL 33172
TITLE	S
NAME	PESANTES, MAURIZIO A
STREET ADDRESS	10520 NW 26 STREET #C 201
CITY-ST-ZIP	MIAMI, FL 33172
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Nicolas Acquavella 3/22/05 (305) 513 3639
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #