

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000100255

Entity Name: AQUAMIZER, INC.**Current Principal Place of Business:**6582 PALMER PARK CIRCLE
SARASOTA, FL 34238**Current Mailing Address:**6580 PALMER PARK CIRCLE
SARASOTA, FL 34238 US**FEI Number: 27-4267003****Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**BLALOCK WALTERS, P.A.
802 11TH STREET WEST
BRADENTON, FL 34205 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	SECRETARY
Name	MASTROMARINO, PAMELA
Address	6580 PALMER PARK CIRCLE
City-State-Zip:	SARASOTA FL 34238

Title	PRESIDENT, TREASURER
Name	MASTERSON, THOMAS
Address	6580 PALMER PARK CIRCLE
City-State-Zip:	SARASOTA FL 34238

Title	DIRECTOR
Name	ROSENE, BRUCE
Address	6580 PALMER PARK CIRCLE
City-State-Zip:	SARASOTA FL 34238

Title	DIRECTOR
Name	WRIGHT, JAMES
Address	6580 PALMER PARK CIRCLE
City-State-Zip:	SARASOTA FL 34238

Title	DIRECTOR
Name	MASTERSON, THOMAS
Address	6580 PALMER PARK CIRCLE
City-State-Zip:	SARASOTA FL 34238

Title	ASST. SECRETARY
Name	MASTROMARINO, EKATERINA
Address	6580 PALMER PARK CIRCLE
City-State-Zip:	SARASOTA FL 34238

I hereby 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 all other like empowered.

SIGNATURE: PAMELA MASTROMARINO**SECRETARY/CONTROLE 03/30/2022**
R_____
Electronic Signature of Signing Officer/Director Detail_____
Date