2001 UNIFORM BUSINES DOCUMENT # 576124	S REPORT (U	BR) FILED Apr 25, 2001 8:00 am
1. Entity Name	s (	• Secretary of State
AQUA INVESTMENTS INC		04-25-2001 90373 002 ***150.00
Principal Place of Business Mailing	g Address	
42 PLAZA DRIVE		A0056700
ORMOND BEACH, M.	32176	
42 PLAZA DRIJE	ing Address <b>5 79 4 É</b> 9, Apt. #, etc.	DO NOT WRITE IN THIS SPACE
DEMOND LEACH . FL.	CELIDA	4. FEI Number \$9 - 1834837 Applied For Not Applicable
Zip Country Zip	116 Country VSLV	
RUTH MORARES H		
42 PLAZA DR.	Str	reet Address (P.O. Box Number is Not Acceptable)
ORMOND BEACH, FL. 32176	Cit	ty FL Zip Code
8. The above named entity submits this statement for the purp	lose of changing its registered off	
SIGNATURE		
Signature, typed or printed name of rogistered agent ano title if app		nt signature required when reinstating) DATE
<ul> <li>9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)</li> </ul>	FILE NOW!!! FEE IS \$ After MAY 1, 2001 Fee will ake Check Payable to Depart	be \$550.00 Trust Fund Contribution Added to Fees
11. OFFICERS AND DIRECTO	DRS 12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
NAME RUTH MORARESH STREET ADDRESS 42 PLAZA DR CITY-ST-ZIP ORMOND BEACH, FL. 321	NAME STREET ADD	DRESS 1415 OCEAN SHORE BLVD
TITLE V NAME EDWARD HILL STREET ADDRESS 75 ASHBY B. CFTY-ST-ZIP DEERFIELD BEACH, FL. 3	Delete TITLE NAME STREET ADD	DURESS 131 YONGE CRESCENT
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete TITLE NAME STREET ADI CITY-ST-Z	Change 🗌 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete TITLE NAME STREET AD CITY-ST-Z	
TITLE NAME STREEY ADDRESS CITY-ST-ZIP	Delete TITLE NAME STREET AD CITY-ST-Z	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete TITLE NAME STREET AD CITY-ST-Z	
indicatéd on this report or supplemental report is true and of the corporation or the receiver or trustee empoyered to changed, or on an attactment with an address with all o	d accurate and that my signature o execute this report as required I ther like empowered.	tion stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information is shall have the same legal effect as if made under oath; that I am an officer or director by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if $ \begin{array}{c} AppR-16/01 & 386-441-1467\\ \hline Dayle & Daylime Phone # \end{array} $
JUNALURE	AME OF SIGNING OFFICER OR DIRECTOR	