## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 583794**

City-St-Zip:

FLORAL CITY, FL 34436 US

Entity Name: AQUATIC MARINE SYSTEMS INC

FILED Jan 19, 2005 Secretary of State

Littly Na	IIIe. AQUATI	S WARINE STOTEWS, INC.			
Current P	rincipal Plac	e of Business:	New Principal Place o	New Principal Place of Business:	
	UTH ISTACHA CITY, FL 3263				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
12390 S. ISTACHATTA ROAD FLORAL CITY, FL 34436				17175 SE 76TH BOXBURY CT LADY LAKE, FL 32163	
FEI Number: 59-1878023 FEI Number Applied For ( )		FEI Number Not Applicable ( )	Certificate of Status Desired ( )		
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
12930 S.IS FLORAL C	THOMAS L STACHATTA F CITY, FL 3443 a named entity e of Florida.	6 US	e purpose of changing its registered	l office or registered agent, or both,	
SIGNATU					
Electronic Signature of Registered Agent			Agent	Date	
Election Car	mpaign Financir	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	COATES, THO 12930 S.ISTAG		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	EGGERS, CHA 17175 SE 76T	) Delete ARLES F VP H BOXBURY COURT S, FL 32162 US	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	ST ( COATES, ELIZ 12930 S ISTAG		Title: Name: Address	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

City-St-Zip:

SIGNATURE: CHARLES F EGGERS VD 01/19/2005