## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F03000006408

Entity Name: AQUA SIGNAL CORPORATION

191 N. WACKER DR., STE. 3700

CHICAGO, IL 60606

Address: City-St-Zip: FILED Jun 28, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
1125 ALEX CARY, IL	KANDER CT. 60013				
Current Mailing Address:			New Mailing Address:		
1125 ALEX CARY, IL	KANDER CT. 60013				
FEI Number	: 36-3390720	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
	OHN DEGAN DR. LUCIE, FL 34				
	named entity : e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Agent			ent	Date	
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution ( ).	t receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	WAGENFELD,	I, STR. 12, PO BOX 45 01 61 D-28	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP ( ) HEEDE, ALENA 7701 OLD POS CRYSTAL LAK	ST	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	S () BRAUN, W. DA	) Delete VID	Title: Name:	( ) 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.

Address:

City-St-Zip:

SIGNATURE: ALENA HEEDE VP 06/28/2005