

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J24704

Entity Name: WATER RESTORATION, INC.

FILED
Apr 19, 2006
Secretary of State

Current Principal Place of Business:

1603 WEST MCNAB RD.
POMPAN0 BEACH, FL 33069 US

New Principal Place of Business:

Current Mailing Address:

1603 WEST MCNAB RD.
POMPAN0 BEACH, FL 33069 US

New Mailing Address:

FEI Number: 59-2721029

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WU, MADELINE M.
3436 PINE HAVEN CIR.
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: WU, MADELINE M.,
Address: 3436 PINE HAVEN CIR.
City-St-Zip: BOCA RATON, FL

Title: D () Delete
Name: WU, JOYCE
Address: 3436 PINE HAVEN CIR.
City-St-Zip: BOCA RATON, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: WU, CHUN-TEH
Address: 3436 PINE HAVEN CIR.
City-St-Zip: BOCA RATON, FL

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

SIGNATURE: MADELINE WU

DP

04/19/2006

Electronic Signature of Signing Officer or Director

Date