

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 26, 2006 08:00 AM
Secretary of State

DOCUMENT # K35705

1. Entity Name
AQUATICA TROPICALS, INC.



Principal Place of Business
**218 SOUTH WEBB RD.
PLANT CITY, FL 33566 US**

Mailing Address
**218 SOUTH WEBB RD.
PLANT CITY, FL 33566 US**



02282006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2913030

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**TANNER, JAY M
218 SOUTH WEBB RD.
PLANT CITY, FL 33566**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PTD
TANNER, JAY M.
218 SOUTH WEBB RD.
PLANT CITY, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VSD
TANNER, SUE EVELYN
218 SOUTH WEBB RD.
PLANT CITY, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
SEAREST, VERGEL E
9917 BAY DR
GIBSONTON, FL 33534**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
SAENZ, KAREN
516 WILLOW RUN KNOLL
LAKELAND, FL 33813**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
SAENZ, BRETT
516 WILLOW RUN KNOLL
LAKELAND, FL 33813**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
UMLAWF, MARK
6926 O'DONNER LOOP W
LAKELAND, FL 33809**

000000534517
05/08/06-80015-008 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAY M. TANNER

Date

4-19-06

Daytime Phone #

863-660-3391