

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 18, 2003 8:00 am
Secretary of State

07-18-2003 90083 031 ***550.00

0128000 AT

DOCUMENT # **K88197**

1. Entity Name
AQUARIAN SOFTWARE, INC.



Principal Place of Business
**1415 BRIERCLIFF DR.
ORLANDO FL 32806-1407
US**

Mailing Address
**PO BOX 540115
ORLANDO FL 32854-1115
US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2957632**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GHIOTO, RODNEY
925 MAIN STREET
WINDERMERE FL 34786**

Name **GHIOTO, RODNEY**
Street Address (P.O. Box Number is Not Acceptable)
1415 BRIERCLIFF DR.
City **ORLANDO** FL Zip Code **32806**

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 *Rodney D. Ghioto* **RODNEY D. GHIOTO** DATE **7/16/03**

FEE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
DP	GHIOTO, RODNEY	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
	1415 BRIERCLIFF DR.		
	ORLANDO FL 32806-1407		
V	GHIOTO, LYNNE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
	1415 BRIERCLIFF DR.		
	ORLANDO FL 32806-1407		
		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
		<input type="checkbox"/> Change <input type="checkbox"/> Addition	

12. I hereby certify that the information supplied with this filing does not qualify 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 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: *Rodney D. Ghioto* **RODNEY D. GHIOTO** DATE **7/16/03** 407-228 0298

CR2E034 (4/03)