

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 19, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000010027

1. Entity Name
AQUAFORMZ, LLC.



Principal Place of Business
**4903 PLANTATION DRIVE
TAMPA, FL 33615 US**

Mailing Address
**4903 PLANTATION DRIVE
TAMPA, FL 33615 US**

DO NOT WRITE IN THIS SPACE



02282007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
35-2249267

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CRESPO, ARTAGNAN A
515 39TH AVENUE N.E.
ST. PETERSBURG, FL 33703**

**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

Artagnan Crespo
ARTAGNAN CRESPO

2/28/07
DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	BENNETT, MICHAEL S
STREET ADDRESS	4903 PLANTATION DR.
CITY-ST-ZIP	TAMPA, FL 33615
TITLE	MGR
NAME	CRESPO, ARTAGNAN A
STREET ADDRESS	515 39TH AVENUE N.E.
CITY-ST-ZIP	ST. PETERSBURG, FL 33703
TITLE	MGR
NAME	BENNETT, MICHAEL S
STREET ADDRESS	4803 PLANTATION DR
CITY-ST-ZIP	TAMPA, FL 33615
TITLE	MGR
NAME	CRESPO, ARTAGHAN A
STREET ADDRESS	515 39TH AVE NE
CITY-ST-ZIP	SAINT PETERSBURG, FL 33703
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000672464
03/28/07-80070-015 50.00

**DO NOT WRITE
IN THIS SPACE**

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Artagnan Crespo
ARTAGNAN CRESPO

2/28/07

727-434-1423

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #