

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M88059 (4)

1. Corporation Name
AQUARIUS MARKETING, INC.

Principal Place of Business
**% STEPHEN BANKS
1369 LOTUS DR. NORTH
DUNEDIN FL 34698-2410**

Mailing Address
**% STEPHEN BANKS
1369 LOTUS DR. NORTH
DUNEDIN FL 34698-2410**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/27/1988		3a. Date of Last Report 05/19/1994	
21. Subst. Apt. #, etc.		26. Subst. Apt. #, etc.		4. FEI Number 59-2899330		Approved For Not Applicable	
22. City & State		27. City & State		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23. Zip		28. Zip		6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24. Country		29. Country		30. Country		8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

**BANKS, STEPHEN
1369 LOTUS DR. NORTH
DUNEDIN FL 34698**

10. Name and Address of New Registered Agent

81. Name **BANKS, STEPHEN**
82. Street Address (P.O. Box Number is Not Acceptable)
1289 St. Andrews Dr.
83.
84. City **Dunedin** FL 85. Zip Code **34698**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ Signature of Person in Charge of Incorporation and the Agent _____ Signature of Registered Agent (Signature required when new filing) _____ Date _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1. TITLE	☐ Change ☐ Addition
NAME	BANKS, STEPHEN	2. NAME	
STREET ADDRESS	1369 LOTUS DR. NORTH	3. STREET ADDRESS	
CITY-ST-ZIP	DUNEDIN FL	4. CITY-ST-ZIP	
TITLE		21. TITLE	☐ Change ☐ Addition
NAME		22. NAME	
STREET ADDRESS		23. STREET ADDRESS	
CITY-ST-ZIP		24. CITY-ST-ZIP	
TITLE		31. TITLE	☐ Change ☐ Addition
NAME		32. NAME	
STREET ADDRESS		33. STREET ADDRESS	
CITY-ST-ZIP		34. CITY-ST-ZIP	
TITLE		41. TITLE	☐ Change ☐ Addition
NAME		42. NAME	
STREET ADDRESS		43. STREET ADDRESS	
CITY-ST-ZIP		44. CITY-ST-ZIP	
TITLE		51. TITLE	☐ Change ☐ Addition
NAME		52. NAME	
STREET ADDRESS		53. STREET ADDRESS	
CITY-ST-ZIP		54. CITY-ST-ZIP	
TITLE		61. TITLE	☐ Change ☐ Addition
NAME		62. NAME	
STREET ADDRESS		63. STREET ADDRESS	
CITY-ST-ZIP		64. CITY-ST-ZIP	

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Stephen M. Banks

SH MB

4/28/96

813-734-5340

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Secretary of State