2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2009
Secretary of State

DOCUMENT# M98349

Entity Name: CELESTIAL AQUATIC WORLD TROUBLESHOOTERS,INC.

Current Principal Place of Business:

C/O STAPLETON, SMITH, JOHNSON, P.A.
1700-66 ST N # 304
SAINT PETERSBURG, FL 33710

New Principal Place of Business:

C/O STAPLETON, JOHNSON & MCDOWELL, P.A.
1700-66 ST N # 304
SAINT PETERSBURG, FL 33710

Current Mailing Address:

C/O STAPLETON, SMITH, JOHNSON, P.A.
1700-66 ST N # 304
SAINT PETERSBURG, FL 33710

New Mailing Address:

C/O STAPLETON, JOHNSON & MCDOWELL, P.A.
1700-66 ST N # 304
SAINT PETERSBURG, FL 33710

FEI Number: 59-2914777 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, THEODORE J
1700-66TH ST N, # 304
SAINT PETERSBURG, FL 33710 US

Name and Address of New Registered Agent:

MCDOWELL, MICHAEL
1700-66TH ST N, # 304
SAINT PETERSBURG, FL 33710 US

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: MICHAEL MCDOWELL 04/21/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: WILSON, CAREY ALLEN
Address: 1012 NO MAIN ST APT C
City-St-Zip: NORTH CANTON, OH 44720

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify 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: CAREY ALLEN WILSON P 04/21/2009
Electronic Signature of Signing Officer or Director Date