

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 21, 2007  
Secretary of State**

DOCUMENT# N97000000533

Entity Name: NEPTUNE AQUATICS, INC.

**Current Principal Place of Business:**

4000 JEFFERSON STREET  
HOLLYWOOD, FL 33021

**New Principal Place of Business:**

**Current Mailing Address:**

4000 JEFFERSON STREET  
HOLLYWOOD, FL 33021

**New Mailing Address:**

FEI Number: 65-0727278      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TURNIPSEED, JOHN M  
4000 JEFFERSON STREET  
HOLLYWOOD, FL 33021      US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: TURNIPSEED, JOHN M  
Address: 4000 JEFFERSON STREET  
City-St-Zip: HOLLYWOOD, FL 33021

Title: D      (X) Delete  
Name: TURNIPSEED, STEPHANIE S  
Address: 4000 JEFFERSON STREET  
City-St-Zip: HOLLYWOOD, FL 33021

Title: D      (X) Delete  
Name: ORITZ, NICHOLAS  
Address: 730 N.E. 71ST  
City-St-Zip: MIAMI, FL 33138

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN M TURNIPSEED

D

01/21/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date