2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000011928

City-St-Zip:

DELRAY BEACH, FL 33446

Entity Name: AQUATRON CORPORATION

FILED Mar 30, 2009 Secretary of State

Current Principal Place of Business: 6453 WEST ROGERS CIRCLE SUITE S6 BOCA RATON, FL 33487 Current Mailing Address: 6453 WEST ROGERS CIRCLE SUITE S6 BOCA RATON, FL 33487			New Principal Place	New Principal Place of Business:					
			6453 WEST ROGERS CIRCLE SUITE S5 BOCA RATON, FL 33487 New Mailing Address: 6453 WEST ROGERS CIRCLE SUITE S5 BOCA RATON, FL 33487						
					FEI Number	r: 65-0985815	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
					Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:	
6660 DAN	, CYNTHIA NA POINT COV BEACH, FL 33								
	e named entity te of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,					
SIGNATU	IRE:								
	Electro	nic Signature of Registered Ag	gent	Date					
Election Ca	ampaign Financin	g Trust Fund Contribution ().							
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS						
Title: Name: Address: City-St-Zip:	BACH, MARJC 270 BLOSSON		Title: Name: Address: City-St-Zip:	() Change () Addition					
Title: Name: Address: City-St-Zip:	GENTILE, CYN 6660 DANA PO	DINT COVE	Title: Name: Address: City-St-Zip:	() Change () Addition					
Title: Name: Address: City-St-Zip:	VS (HARLAN, DEB 185 HONEYBE ORANGE, OH	ELLE OVAL	Title: Name: Address: City-St-Zip:	() Change () Addition					
		44022	,						

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.

City-St-Zip:

SIGNATURE: THOMAS GENTILE T 03/30/2009