2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

Mar 12, 2007 8:00 am Secretary of State 03-12-2007 90371 019 ***150.00 **DOCUMENT # P00000017337** AIRPORT WATERBLASTING SERVICES, INC. 40034308 Mailing Address Principal Place of Business 883 WEST GRANADA BLVD 883 WEST GRANADA BLVD ORMOND BEACH, FL 32174 ORMOND BEACH, FL 32174 No Chg-P 02102007 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3632817 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BROCKENBOURGH, SHARON DO NOT WRITE 883 WEST GRANADA BLVD ORMOND BEACH, FL 32174 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. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees FOFFICERS AND DIRECTORS 10. TITLE ALMOND, RICHARD P NAME STREET ADDRESS 32 GREENVALE DR ORMOND BEACH, FL 32174 CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-SY-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP 12. 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 or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CMONS

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