

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000078237

Entity Name: AQUA-VISTA HOLDING, INC.

FILED
Jan 22, 2009
Secretary of State

Current Principal Place of Business:

1800 SUNSET HARBOUR DR, STE 1
MIAMI BEACH, FL 33139

New Principal Place of Business:

1800 SUNSET HARBOUR DR, STE 1
MIAMI BEACH, FL 33140

Current Mailing Address:

1800 SUNSET HARBOUR DR, STE 1
MIAMI BEACH, FL 33139

New Mailing Address:

5500 COLLINS AVE # 1802
MIAMI BEACH, FL 33140

FEI Number: 65-1060119

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAJAROFF, KEREN
1800 SUNSET HARBOUR DR. #
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

BAJAROFF, KEREN
5500 COLLINS AVE # 1802
MIAMI BEACH, FL 33140 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: KEREN BAJAROFF

01/22/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BAJAROFF, KEREN
Address: 1800 SUNSET HARBOUR DR, STE 1
City-St-Zip: MIAMI BEACH, FL 33139

Title: STD () Delete
Name: BAJAROFF, DANIEL
Address: 1800 SUNSET HARBOUR DR, STE 1
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BAJAROFF, KEREN
Address: 5500 COLLINS AVE # 1802
City-St-Zip: MIAMI BEACH, FL 33140

Title: STD (X) Change () Addition
Name: BAJAROFF, DANIEL
Address: 5500 COLLINS AVE # 1802
City-St-Zip: MIAMI BEACH, FL 33140

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: KEREN BAJAROFF

PD

01/22/2009

Electronic Signature of Signing Officer or Director

Date