## ASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

		ASE READ	ALL INS	RUCTIO	NO BELOHE	COMPLET	ING THIS F	онм.		
AP	PLICA	ION	FLORIDA DEPARTMENT OF STATE						٠	
	FOR		150	Jim Sn Secretary of			FILED			
REINSTATE DIVISION OF CORPORATIONS							02 NOV -5 AM 9: 06			
DOCUMENT # P01000021867										
1. Corporation Name  AQUATIC CREATIONS AND SERVICES, INC.							SECRETARY OF STATE TALLAHASSEE, FLORIDA			
AUUA	HC CRE	EATIONS AND SI	ERVICES,	, INC.						
Principal F	lace of Busin	ess	Mailing Addr	Mailing Address						
9122 SOUT Miami FL :		1 AVENUE ROAD	9122 SOUTHWEST 157TH AVENUE ROAD MIAMI FL 33196							
If above	addresses are	incorrect in any way, line thr	ough incorrect in	nformation and e	inter correction below.					
		Address, If Applicable		New Mailing Office Address, If Applicable			Date Incorporated or Qualified     To Do Business in Florida     03/01/2001			
Suite, Apt.	#, etc.	- The Transfer of the Control of the	Suite, Apt. #, etc.			.5. FEI Numbe			ed For	
City & State			City & State				65-10823		Applicable	
Zip Country		Zip Count		ountry	6. CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee require for a Certificate of Status					
7. Names	and Street Ad	Idresses of Each Officer and/	or Director (Flo	rida nonprofit cor	rporations must list at le	ast 3 directors)				
		Name of Officers and/or Directors		Street Address of Each Officer and/or Director			City / State / Zip			
PSTD	LOPEZ, ADRIAN			9122 SOUTHWEST 157TH AVENU						
	<b>-</b>									
				F 4 4 4			500008810815 1/05/0201094009 **150.00			
		<u> </u>				11/15/1	<u>  2  1  94 </u>	<u> 109 **150.00</u>	<del></del>	
						·				
	0 Na	o and Address of Owner	Parletana - 1 A		<del></del>					
8. Name and Address of Current Registered Agent  Name  Dunt							9. Name and Address of New Registered Agent RODRIGUEZ			
SPIEGEL & UTRERA, P.A. 343 ALMERIA AVENUE				Street Address (P.O. Box Number is			is Not Acceptable)	<del></del>		
	GABLES F				Suite, Apt. #, Etc.	SW 157	TH AVE / RI	<u> </u>		
					City	·		State Zip Code	<del></del>	
0 I being	sprointed the	a registered agest of the above	un named assess		MIAM:			FL   33196	)	
o. i, oeiily	, арроннец т	e registered agent of the above	re named corpor	ration, am familia )	u with and accept the ol	ongations of Section	on 607.0505, F.S. or (	ь17. <b>0505</b> , F.S.		
ignature o		CICALAT		0=1			. 1	01/02		
egistered	Agent	7 3.5 5.0	CA UES	ENT MUST SIGN	<u>uiaeu</u>		Date	01/02		
1. I certify	that I am an o	fficer or director or the receiv				royldad for in at-	ntor 607 or 647 50	I from a constituent of	- 411	
this rein	statement app	lication, the reason for dissol	ution has been	eliminated, the co	orporate name satisfies	the requirements	of section 607.0401 c	or 617.0401, F.S., that al	i illing Il fees	

owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/30/02 305-281-6627

Date Daytime Phone #

Aquatic Creations & Services, Inc. 9122 S.W. 157<sup>th</sup> Ave. Rd. Miami, Fl. 33196 October 30, 2002

Division of Corporations Annual Report/Reinstatement Section PO Box 6327 Tallahassee Fl. 32314-6327

Dear Sir or Madam:

This letter is in reference to a, "Notice of Administrative Dissolution or Revocation," (Document # P01000021867) that was mailed to me in late October. This notice indicates that I have not paid or filled out the annual report/uniform business report that was due between January 1st and May 1st of each calendar year. This notice also indicates that a second notice was sent stating that if fee and report was not sent that the corporation would be dissolved or revoked.

I am writing to you today to inform you that some how I did not receive any previous, "Uniform Business Report," first or second notice as indicated in this report. I have reviewed the address and all other information on this report to be accurate. I now know that this report is due in the beginning of every calendar year and if I do not receive one in the mail to call and request another copy.

Thank you for your time regarding this matter.

्रा विश्वकारी प्राप्त है। यह विश्वकार के के के के के के हैं। हैं , हैं की प्रमुख्यात्वार के हैं के हैं। यह हैं के किस के के के के किस के सम्मान्त्रात्वार प्राप्त के स्वाप्त के किस के क Sincerely,

Adrian Lopez