2006 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 26, 2006 8:00 am Secretary of State DOCUMENT # P01000097630 1. Entity Name 04-26-2006 90178 017 ***150.00 AQUARIUS BUILDING, DESIGN & ENGINEERING, INC. Principal Place of Business Mailing Address 20270 S TAMIAMI TRAIL 20270 S TAMIAMI TRAIL ESTERO, FL 33928 ESTERO, FL 33928 3. Mailing Address 2. Principal Place of Business Bruner W Bruner *3*275 Suite, Apt, #, etc. Apt. #. etc. 01102006 CR2E034 (11/05) Chg-P 4. FEI Number Applied For 59-3749178 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent Name and Address of Current Registered Agent Name SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 1840 SW 22ND ST. **4TH FLOOR** MIAMI, FL 33145 City Zip Code FL 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. SIĞÑATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOWILL FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees 10. · OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 **PSTD** TITLE ☐ Delete ΠLE ☐ Change ☐ Addition JACKSON, WILLIAM W NAME NAME STREET ADDRESS 710 JUNG BOULEVARD WEST STREET ADDRESS CITY-ST-ZIP NAPLES, FL 34120 CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-78 THEF ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ŤM F ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP FITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplied pental 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 receive it is the same legal effect as if made under oath; that I am an officer or director of the corporation or the receive it is the same legal effect as if made under oath; that I am an officer or director of the corporation or the receive it is the same legal effect as if made under oath; that I am an officer or director of the corporation or the receive it is the same legal effect as if made under oath; that I am an officer or director of the corporation or the receive it is the same legal effect as if made under oath; that I am an officer or director of the corporation or the receive it is the same legal effect as if made under oath; that I am an officer or director of the corporation or the receive it is the same legal effect as if made under oath; that I am an officer or director of the corporation or the receive it is the same legal effect as if made under oath; that I am an officer or director of the corporation or the receive it is the same legal effect as if made under oath; that I am an officer or director of the corporation or the receive it is the same legal effect as if made under oath; that I am an officer or director of the corporation or the receive it is the same legal effect as if made under oath; that I am an officer or director of the corporation or the receive it is the same legal effect as if t of the corporation or the received changed, or on an attachment dress, with all other like empowered, SIGNATURE:

D OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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