

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000001834

FILED
Aug 13, 2007
Secretary of State

Entity Name: AQUARIUS OF PORT ST. LUCIE INC.

Current Principal Place of Business:

C/O SOUTH BROWARD ACCNTING SVCE INC.
1152 N UNIVERSITY DRIVE STE 202
PEMBROKE PINES, FL 33024

New Principal Place of Business:

C/O HMD
16100 NE 16 AVE SUITE B
NORTH MIAMI BEACH, FL 33162

Current Mailing Address:

C/O SOUTH BROWARD ACCNTING SVCE INC.
1152 N UNIVERSITY DRIVE STE 202
PEMBROKE PINES, FL 33024

New Mailing Address:

5489 SAINT JAMES DR
PORT ST LUCIE, FL 34983

FEI Number: 95-4893475

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHEDIAK, MIRTA
1152 N UNIVERSITY DRIVE STE 202
PEMBROKE PINES, FL 33024 US

Name and Address of New Registered Agent:

CORTEO, MARION
5489 ST JAMES DR
PORT ST LUCIE, FL 34983 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: MARION CORTEO

08/13/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CORTEO, MARION
Address: 1152 N UNIVERSITY DR STE 202
City-St-Zip: PEMBROKE PINES, FL 33024

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CORTEO, MARION
Address: 5489 SAINT JAMES DR
City-St-Zip: PORT ST LUCIE, FL 34983

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: MARION CORTEO

PRES

08/13/2007

Electronic Signature of Signing Officer or Director

Date