1 of 2

2004 FOR PROFIT CORPORATION ANNUAL REPORT

3/10/2004-90019-043-$150.00-$150.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 AUG 25 PM 12:11

DOCUMENT # P02000017098

1. Entity Name
AQUA I CORP.

Principal Place of Business	Mailing Address
TURNBERRY PLAZA SUITE 801 2875 NE 191 STREET AVENTURA FL 33180	TURNBERRY PLAZA SUITE 801 2875 NE 191 STREET AVENTURA FL 33180

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

03032004 Chg-P CR2E034 (10/03)

4. FEI Number: 33-1099216 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SERBER, DANIEL J ESQ
TURNBERRY PLAZA SUITE 801
2875 NE 191ST STREET
AVENTURA, FL 33180

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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.

SIGNATURE ____________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	KALACH, RAFAEL	NAME	
STREET ADDRESS	TURNBERRY PLAZA S801, 2875 NE 191ST ST	STREET ADDRESS	
CITY-ST-ZIP	AVENTURA, FL 33180	CITY-ST-ZIP	
TITLE	☐ Delete	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-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
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CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	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-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: [signature] RAFAEL KALACH 3/5/04 (305) 932-6262
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

P0 272

SMITH, ORTIZ, GOMEZ AND BUZZI, P.A.
CERTIFIED PUBLIC ACCOUNTANTS
132 MINORCA AVENUE
CORAL GABLES, FLORIDA 33134

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JOSE E. SMITH, C.P.A.
RODOLFO L.
RODOLFO L. ORTIZ, CONSULTANT

MEMBERS:
AMERICAN INSTITUTE OF
CERTIFIED PUBLIC ACCOUNTANTS
FLORIDA INSTITUTE OF
CERTIFIED PUBLIC ACCOUNTANTS

August 25, 2004

Ms. Tina Roberts
Department of State
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Re: Aqua I Corp.
Document # P02000017098
Re: Aqua II Corp.
Document # P02000016922
Re: Aqua III Corp.
Document # P02000020947

Dear Ms. Roberts:

I am writing to confirm that the above reference Companies have not received any correspondence from the Department of State requesting additional information in order to file the 2004 UBR.

If you have any questions or require additional information regarding this matter, please do not hesitate to contact Grizel Gil at (305) 441-1012 ext. 235.

Sincerely

Grizel Gil