

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 25, 2003 8:00 am
Secretary of State

02-25-2003 90128 033 ***158.75

DOCUMENT # P02000053105

1. Entity Name
AQUA VENTIONS DESIGN, INC.



Principal Place of Business
3123 LOWNDES DR
WINTER PARK FL 32792

Mailing Address
PO BOX 2546
GOLDENROD FL 32733-2546

SAME

Change address to



2. Principal Place of Business

6660 Time Square Ave

3. Mailing Address

Suite, Apt. #, etc.
105

Suite, Apt. #, etc.

City & State
Orlando Florida

City & State

Zip
32835

Country
USA

Zip

Country

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number Applied For
☒ Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LOY, DENNIS R
3123 LOWNDES DR
WINTER PARK FL 32792

see address change

7. Name and Address of New Registered Agent

Name Dennis R Loy

Street Address (P.O. Box Number is Not Acceptable)

6660 Time Square Ave suite 105

City Orlando FL Zip Code 32835

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 *Dennis R Loy*

(NOTE: Registered Agent signature required when reinstating)

DATE

1/28/03

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing **\$5.00** May Be
Trust Fund Contribution ☒ Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME LOY, DENNIS R
STREET ADDRESS 3123 LOWNDES DR
CITY-ST-ZIP WINTER PARK FL 32792 ☐ Delete

TITLE V
NAME LOY, LAUREN E
STREET ADDRESS PO BOX 2546
CITY-ST-ZIP GOLDENROD FL 32733-2546 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Pres
NAME Dennis R Loy
STREET ADDRESS 6660 Time Square ave suite 105
CITY-ST-ZIP Orlando FL 32835 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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: *Dennis R Loy*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

313-911-407
2203 *299-6500*
Date Daytime Phone #

CR2E034 (10/02)