


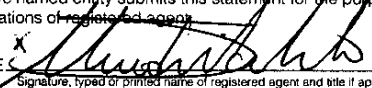
FILED
Mar 08, 2007 8:00 am
Secretary of State

40031617



4. FEI Number	Applied For
57-1186196	Not Applicable

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

DOCUMENT # P03000091838				Secretary of State 03-08-2007 90007 033 ***150.00	
1. Entity Name WATERJET CREATIONS, CORP.					
Principal Place of Business 1036 E. 24TH ST. HIALEAH, FL 33010				Mailing Address 1036 E. 24TH ST. HIALEAH, FL 33010	
2. Principal Place of Business - No P.O. Box #				3. Mailing Address	
Suite, Apt. #, etc.				Suite, Apt. #, etc.	
City & State				City & State	
Zip		Country		Zip	
City & State		City & State		4. FEI Number 57-1186196	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent SALCEDO, ALVARO E 1036 E. 24TH ST. HIALEAH, FL 33010				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: 				DATE: 03/05/07	
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP				TITLE NAME STREET ADDRESS CITY - ST - ZIP	
P SALCEDO, ALVARDO E 1331 BRICKEL BAY DR., APT. 202 MIAMI, FL 33131				Change Addition	
T VIVAS, LUIS A 855 NW 44 AVE APT 11 MIAMI, FL 33126				Change Addition	
V CARCAMO, JAIME 7889 WEST 36 AVENUE HIALEAH, FL 33018				Change Addition	
Delete				Change Addition	
Delete				Change Addition	
Delete				Change Addition	
Delete				Change Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: 				DATE: 03/05/07 786-586-6690	