

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000141380

FILED
Dec 08, 2005
Secretary of State

Entity Name: A QUARELLA H20 MULTIPLE SERVICES INC

Current Principal Place of Business:

5820 N CHURCH AVE
APT 420
TAMPA, FL 33614 US

New Principal Place of Business:

6129 SCORPIO CIR DR
APT 164
TAMPA, FL 33614 US

Current Mailing Address:

5820 N CHURCH AVE
APT 420
TAMPA, FL 33614 US

New Mailing Address:

6129 SCORPIO CIR DR
APT 164
TAMPA, FL 33614 US

FEI Number: 20-0427162

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CABRERA, RAFAEL
5820 N CHURCH AVE
APT 420
TAMPA, FL 33614 US

Name and Address of New Registered Agent:

CABRERA, RAFAEL
6129 SCORPIO CIR DR
APT 164
TAMPA, FL 33614 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: RAFAEL CABRERA

12/08/2005

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: P () Delete
Name: CABRERA, RAFAEL
Address: 5820 N CHURCH AVE APT 420
City-St-Zip: TAMPA, FL 33614 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CABRERA, RAFAEL
Address: 6129 SCORPIO CIR DR APT 164
City-St-Zip: TAMPA, FL 33614 US

Title: VP () Change (X) Addition
Name: SANCHEZ, BISMAR
Address: 2910 W GIDDENS AVE APT10
City-St-Zip: TAMPA, FL 33614 US

Title: S () Change (X) Addition
Name: CABRERA, NATIVIDAD
Address: 6129 SCORPIO CIR DR APT 164
City-St-Zip: TAMPA, FL 33614 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: RAFAEL CABRERA

P

12/08/2005

Electronic Signature of Signing Officer or Director

Date