

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000145940

Entity Name: AQUATIC PURIFICATION SYSTEMS, INC.

FILED
Apr 17, 2009
Secretary of State

Current Principal Place of Business:

6001 NW 153RD STREET
SUITE 158
MIAMI LAKES, FL 33014

New Principal Place of Business:

Current Mailing Address:

6001 NW 153RD STREET
SUITE 158
MIAMI LAKES, FL 33014

New Mailing Address:

FEI Number: 56-2424611 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCKINLEY, THOMAS
9356 SW 77TH AVENUE #J5
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MCKINLEY, THOMAS
Address: 9356 SW 77TH AVENUE #J5
City-St-Zip: MIAMI, FL 33156

Title: S () Delete
Name: MCKINLEY, ROSA M
Address: 9356 SW 77TH AVENUE #J5
City-St-Zip: MIAMI, FL 33156

Title: V () Delete
Name: PRIETO, ROBERTO F
Address: 1612 SW 102 PLACE
City-St-Zip: MIAMI, FL 33165

Title: T () Delete
Name: MEYERS, BEULAH
Address: 1890 S. OCEAN DRIVE #1701E
City-St-Zip: HALLANDALE, FL 33009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: THOMAS MCKINLEY

D

04/17/2009

Electronic Signature of Signing Officer or Director

_____ Date