2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# P04000061945

Entity Name: PROFESSIONAL AQUARIUM SALES AND SERVICE ASSOCIATION, INC.

Current Principal Place of Business:

4801 JOHNSON ROAD, SUITE 10
COCONUT CREEK, FL 33073

New Principal Place of Business:

Current Mailing Address:

4801 JOHNSON ROAD, SUITE 10
COCONUT CREEK, FL 33073

New Mailing Address:

FEI Number: 20-1257909 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STEINBERG, PAUL B ESQ.
767 ARTHUR GODFREY ROAD
MIAMI BEACH, FL 331403413 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

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: TARTAROTTI, KELEYTON D
Address: 4801 JOHNSON ROAD, SUITE 10
City-St-Zip: COCONUT CREEK, FL 33073

Title: VPD ( ) Delete
Name: PACE, ROMUO R
Address: 4801 JOHNSON ROAD, SUITE 10
City-St-Zip: COCONUT CREEK, FL 33073

Title: SD ( ) Delete
Name: TURNER, JEFFREY A
Address: 4801 JOHNSON ROAD, SUITE 10
City-St-Zip: COCONUT CREEK, FL 33073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: TARTAROTTI, KLEYTON D
Address: 4801 JOHNSON ROAD, SUITE 10
City-St-Zip: COCONUT CREEK, FL 33073

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 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: KLEYTON TARTAROTTI PD 04/29/2005

Electronic Signature of Signing Officer or Director — Date