

# **2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P04000087109

Entity Name: AQUASOL FURNITURE INC.

**FILED**  
**Sep 25, 2005**  
**Secretary of State**

## **Current Principal Place of Business:**

9772 PINEOLA DR.  
ORLANDO, FL 32836

## **New Principal Place of Business:**

9766 PINEOLA DR.  
ORLANDO, FL 32836

## **Current Mailing Address:**

9772 PINEOLA DR.  
ORLANDO, FL 32836

## **New Mailing Address:**

9766 PINEOLA DR.  
ORLANDO, FL 32836

FEI Number: 20-1294682

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

MOLINA, HERNANDO  
9772 PINEOLA DR.  
ORLANDO, FL 32836 US

## **Name and Address of New Registered Agent:**

CALVO, RAUL  
1621 NW 99 AVE  
PLANTATION, FL 33322 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: RAUL CALVO

09/25/2005

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MOLINA, HERNANDO  
Address: 9766 PINEOLA DR.  
City-St-Zip: ORLANDO, FL 32836

Title: S ( ) Delete  
Name: SIO, ISIDRA  
Address: 9766 PINEOLA DR.  
City-St-Zip: ORLANDO, FL 32836

Title: VP (X) Delete  
Name: CALVO, RAUL  
Address: 1621 NW 99 AVE  
City-St-Zip: PLANTATION, FL 33322

## **ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P S (X) Change ( ) Addition  
Name: GARCIA-SIO, ISIDRA  
Address: 9766 PINEOLA DR.  
City-St-Zip: ORLANDO, FL 32836

Title: VP T (X) Change ( ) Addition  
Name: CALVO, RAUL  
Address: 1621 NW 99 AVE  
City-St-Zip: PLANTATION, FL 33322

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: ISIDRA GARCIA-SIO

P S

09/25/2005

Electronic Signature of Signing Officer or Director

Date