2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000014635

Entity Name: AQUA SHOWROOM, INC.

FILED Nov 28, 2006 Secretary of State

Certificate of Status Desired ()

Current Principal Place of Business: New Principal Place of Business:

600 PARKVIEW DRIVE 7361 SHELL RIDGE TERRACE **SUITE #222** LAKE WORTH, FL 33467

HALLANDALE BEACH, FL 33009 US

FEI Number:

New Mailing Address: Current Mailing Address:

600 PARKVIEW DRIVE 7361 SHELL RIDGE TERRACE **SUITE #222** LAKE WORTH, FL 33467

HALLANDALE BEACH, FL 33009 US

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FEI Number Not Applicable ()

BARTHELOTTI, MONICA BARTHELOTTI, MONICA R 7361 SHELL RIDGE TERRACE 600 PARKVIEW DRIVE LAKE WORTH, FL 33467

SUITE #222 HALLANDALE BEACH, FL 33009 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: MONICA BARTHELOTTI 11/28/2006

> 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 ().

FEI Number Applied For (X)

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

Title: () Delete Title: (X) Change () Addition BARTHELOTTI, MONICA BARTHELOTTI, MONICA Name: Name: Address: Address:

7361 SHELL RIDGE TERRACE 600 PARKVIEW DRIVE, SUITE # 222 City-St-Zip: HALLANDALE BEACH, FL 33009 US City-St-Zip: LAKE WORTH, FL 33467 US

Title: () Delete Title: () Change (X) Addition Name: Name: BARTHELOTTI, CESAR H MR. Address: Address: 7361 SHELL RIDGE TERRACE LAKE WORTH, FL 33467 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

Ρ SIGNATURE: MONICA BARTHELOTTI 11/28/2006