

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000047610

Entity Name: SUN AQUA VISTA, INC.

FILED  
May 04, 2009  
Secretary of State

## Current Principal Place of Business:

C/O LOUIS D. ZARETSKY  
555 NE 15TH STREET, SUITE 100  
MIAMI, FL 33132

## New Principal Place of Business:

## Current Mailing Address:

C/O LOUIS D. ZARETSKY  
555 NE 15TH STREET, SUITE 100  
MIAMI, FL 33132

## New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ZARETSKY, LOUIS D  
555 NE 15TH STREET  
SUITE 100  
MIAMI, FL 33132 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

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: PD ( ) Delete  
Name: RODRIGUEZ, ALEXANDRE  
Address: 2300 AQUA VISTA BLVD  
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: VPD ( ) Delete  
Name: RODRIGUEZ, GERARD  
Address: 2300 AQUA VISTA BLVD.  
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: VPD ( ) Delete  
Name: APOLLON, ALIX  
Address: 555 NE 15 ST  
City-St-Zip: MIAMI, FL 33132

## 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:

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: ALIX APOLLON

VPD

05/04/2009

Electronic Signature of Signing Officer or Director

Date