

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P05000091204

**Entity Name:** AQUATIC LIFESTYLES, INC.

**FILED**  
**Oct 01, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

1331 GUNN HIGHWAY  
ODESSA, FL 33556

**New Principal Place of Business:**

3710 W. WATERS AVENUE  
TAMPA, FL 33614

**Current Mailing Address:**

1331 GUNN HIGHWAY  
ODESSA, FL 33556

**New Mailing Address:**

3710 W. WATERS AVENUE  
TAMPA, FL 33614

**FEI Number:** 02-0752421

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HUGHES, RYAN M  
1331 GUNN HIGHWAY  
ODESSA, FL 33556 US

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

VERNON, JAMES MARCUS ESQ.  
1721 RAINBOW DRIVE  
CLEARWATER, FL 33755 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: JAMES MARCUS VERNON, ESQ.

10/01/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: HUGHES, MARIA SOZAN  
Address: 3710 W. WATERS AVENUE  
City-St-Zip: TAMPA, FL 33614

I hereby 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 all other like empowered.

SIGNATURE: MARIA SOZAN HUGHES

PD

10/01/2010

Electronic Signature of Signing Officer or Director

Date