

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000046951

Entity Name: AQUARIUM PRO'S INC

**FILED**  
**Mar 16, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

212 SW 2ND AVE  
SUITE B  
CAPE CORAL, FL 33991

**New Principal Place of Business:**

**Current Mailing Address:**

212 SW 2ND AVE  
SUITE B  
CAPE CORAL, FL 33991

**New Mailing Address:**

3512 DEL PRADO BLVD  
109  
CAPE CORAL, FL 33904

FEI Number: 27-2776265

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JENKINS, JEFFREY S  
3512 DEL PRADO BLVD  
#109  
CAPE CORAL, FL 33904 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: P  
Name: JENKINS, JEFFREY S  
Address: 3512 DEL PRADO BLVD #109  
City-St-Zip: CAPE CORAL, FL 33904 US

Title: VP  
Name: JENKINS, JOANNE A  
Address: 3512 DEL PRADO BLVD #109  
City-St-Zip: CAPE CORAL, FL 33904 US

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: JEFFREY S JENKINS

MGR

03/16/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date