

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000085614

**FILED**  
**Jan 09, 2011**  
**Secretary of State**

**Entity Name:** AQUA SAPPHIRE INC.

**Current Principal Place of Business:**

5771 DIXIE BELLE RD  
PALM BEACH GARDENS, FL 33418

**New Principal Place of Business:**

**Current Mailing Address:**

5771 DIXIE BELLE RD  
PALM BEACH GARDENS, FL 33418

**New Mailing Address:**

**FEI Number:** 27-3692912

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

DUNVILLE, LYNDAM  
5771 DIXIE BELLE RD  
PALM BEACH GARDENS, FL 33418 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:** PD  
**Name:** OBEID, JOHN  
**Address:** 5771 DIXIE BELLE RD  
**City-St-Zip:** PALM BEACH GARDENS, FL 33418

**Title:** VPD  
**Name:** DUNVILLE, LYNDAM  
**Address:** 5771 DIXIE BELLE RD  
**City-St-Zip:** PALM BEACH GARDENS, FL 33418

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:** LYNDAM DUNVILLE

VPD

01/09/2011

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

\_\_\_\_\_  
Date