

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000009358

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Entity Name:** AQUAOX DISTRIBUTORS, INC.

**Current Principal Place of Business:**

6820 LYONS TECHNOLOGY PKWY  
STE 205  
COCONUT CREEK, FL 33073

**New Principal Place of Business:**

**Current Mailing Address:**

6820 LYONS TECHNOLOGY PKWY  
STE 205  
COCONUT CREEK, FL 33073

**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:**

RAPID MERCHANT VENTURES, INC.  
160 W CAMINO REAL  
#179  
BOCA RATON, FL 33432 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: PS  
Name: LUNING, REIN  
Address: 6820 LYONS TECHNOLOGY PKWY., STE 205  
City-St-Zip: COCONUT CREEK, FL 33073

Title: VP  
Name: VAN SCHAIK, MICHEL  
Address: 6820 LYONS TECHNOLOGY PKWY., STE 205  
City-St-Zip: COCONUT CREEK, FL 33073

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:** REIN LUNING

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05/01/2012

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

\_\_\_\_\_  
Date