

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000038250

FILED
Apr 06, 2004
Secretary of State

Entity Name: SUMMER RAIN AQUATIC CO.

Current Principal Place of Business:

% PHILIP M. WARREN, ESQ.
3350 E. ATLANTIC BLVD., SUITE 300
POMPANO BEACH, FL 33062

New Principal Place of Business:

5455 NW 24 STREET
MARGATE, FL 33063

Current Mailing Address:

% PHILIP M. WARREN, ESQ.
3350 E. ATLANTIC BLVD., SUITE 300
POMPANO BEACH, FL 33062

New Mailing Address:

5455 NW 24 STREET
MARGATE, FL 33063

FEI Number: 65-0420721

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WARREN, PHILIP M ESQ
3350 E. ATLANTIC BLVD.
SUITE 300
POMPANO BEACH, FL 33062 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: WILSON, ERIC R
Address: 5033 N.W. 81ST TERRACE
City-St-Zip: CORAL SPRINGS, FL 33067

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: WILSON, ERIC R
Address: 5455 NW 24 STREET
City-St-Zip: MARGATE, FL 33063

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ERIC R. WILSON

DPST

04/06/2004

Electronic Signature of Signing Officer or Director

Date