2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 16, 2007 8:00 am Secretary of State

DOCUMENT # P96000049004 1. Entity Name AQUA-TURF ENVIRONMENTAL SERVICES, INC.				04-16-2007 90053 029 ***150.00		
Principal Place of Business Mailing Address 3501 GANDY BLVD. 3501 GANDY BLVD. BOX 1004 BOX 1004 PINELLAS PARK, FL 33781 PINELLAS PARK, FL 33781						
2. Principal Place of Business - No P.O. Box # 2010 28 # ST. N. 3. Mailing Address 2010 28 # Suite, Apt. #, etc. Suite, Apt. #, etc.			4 ST. N.	04092007 Chg-P	CR2E034 (12/06)	
City & Spy ST Pe	ters Burg 7L Country	ST leters 15	country 7L	4. FEI Number 59-3386175	<u> </u>	plied For Applicable
337	6. Name and Address of Current	33713	Country	Certificate of Status Desir Name and Address of No.	Fee Required	
KLINGLER, TERRY 3501 GANDY BLVD. UNIT D115, BOX 1004 PINELLAS PARK, FL 33781 Name Klingler, Terry Street Address (P.O. Box Number is Not Acceptable) City Company City Company Street Address (P.O. Box Number is Not Acceptable) City Company City Company Street Address (P.O. Box Number is Not Acceptable)						
8. The above named entiry submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed prime of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees						
10.	OFFICERS AND		11.	ADDITIONS/CHANGES TO	OFFICERS AND DIRECTORS	IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KLINGLER, TERRY 1106 PASS A GRILLE WAY, B-2 ST. PETERSBURG BEACH, FL		TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change	☐ Addition
NAME STREET ADDRESS CITY+ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		_ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CHY-ST-ZIP		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby of	certify that the information supplied with	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP the exemptions containe	d in Chapter 119, Florida Statut	☐ Change Change Change	☐ Addition

indicated on this report or supplemental report is supplemental report in supplemental report is supplemental report in the component of the corporation or the receiver of trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.