2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 25, 2006 8:00 am Secretary of State DOCUMENT # P97000016147 04-25-2006 90112 009 ***150.00 1. Entity Name AQUA SAFE, INC. Principal Place of Business Mailing Address 4177 CORPORATE CT 4177 CORPORATE CT PALM HARBOR, FL 34683 PALM HARBOR, FL 34683 No Chg-P CR2E034 (11/05) 03202006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3431636 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HOWES, DALE Q DO NOT WRITE 4177 COPRORATE CT PALM HARBOR, FL 34683 IN THIS SPACE 8. 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. I am familiar with, and accept Signature, typed or printed name or registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 П Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE NAME HOWES, DALE Q STREET ADDRESS 4177 CORPORATE CT CITY-ST-ZIP PALM HARBOR, FL 34683 TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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TITLE NAME STREET ADDRESS CITY-ST-7IP

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