

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000031114

FILED  
Mar 12, 2008  
Secretary of State

Entity Name: AQUACULTURE SYSTEMS AXITON, INC.

## Current Principal Place of Business:

9700 SOLAR DRIVE  
TAMPA, FL 33619

## New Principal Place of Business:

## Current Mailing Address:

9700 SOLAR DRIVE  
TAMPA, FL 33619

## New Mailing Address:

FEI Number: 59-3438506      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

IATSENKO, VALERY  
9700 SOLAR DRIVE  
TAMPA, FL 33619      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: P ( ) Delete  
Name: IATSENKO, VALERY  
Address: 937 SEDDON COVE  
City-St-Zip: TAMPA, FL 33602

Title: D ( ) Delete  
Name: BRAMLET, JACK  
Address: 432 ISLAND CAY WAY  
City-St-Zip: APOLLO BEACH, FL 335722658

Title: D ( ) Delete  
Name: MURRAY, R MICHAEL  
Address: 6427 E. MACLAURIN DRIVE  
City-St-Zip: TAMPA, FL 33647

Title: D ( ) Delete  
Name: SEGREST, V ELWYN  
Address: 6306 COCOLANE  
City-St-Zip: APOLLO BEACH, FL 335722658

Title: D ( ) Delete  
Name: MELECH, PAUL J  
Address: 6419 E. MACLAURIN DRIVE  
City-St-Zip: TAMPA, FL 33647

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: VALERY IATSENKO

P

03/12/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date