

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000052601

FILED
Apr 04, 2003
Secretary of State

Entity Name: AQUATECHNICS, INC.

Current Principal Place of Business:

7445 SW 162 PL
MIAMI, FL 33193

New Principal Place of Business:

13270 SW 131 STREET
139
MIAMI, FL 33186

Current Mailing Address:

7445 SW 162 PL
MIAMI, FL 33193

New Mailing Address:

FEI Number: 65-0767476

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARBOZA, LUIS A
7445 SW 162 PL
MIAMI, FL 33193

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: PD () Delete
Name: BARBOZA, LUIS A
Address: 7445 SW 162 PL
City-St-Zip: MIAMI, FL 33193

Title: SD () Delete
Name: BARBOZA, ANNABELLA
Address: 7445 SW 162 PL
City-St-Zip: MIAMI, FL 33193

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BARBOZA, LUIS A
Address: 7445 SW 162 PL
City-St-Zip: MIAMI, FL 33193

Title: VP (X) Change () Addition
Name: BARBOZA, ANNABELLA
Address: 7445 SW 162 PL
City-St-Zip: MIAMI, FL 33193

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: ANNABELLA BARBOZA

VP

04/04/2003

Electronic Signature of Signing Officer or Director

Date