

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000078024

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Entity Name:** AQUATECHNICS MANUFACTURING, INC.

**Current Principal Place of Business:**

3811 WEST UNIVERSITY BLVD  
SUITE 20  
JACKSONVILLE, FL 32217 US

**New Principal Place of Business:**

700 E UNION STREET  
SUITE 22  
JACKSONVILLE, FL 32206 US

**Current Mailing Address:**

700 E UNION ST  
BOX 22  
JACKSONVILLE, FL 32206 US

**New Mailing Address:**

3888 N PONCE DE LEON BLVD  
SAINT AUGUSTINE, FL 32084 US

**FEI Number:** 59-3541953

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FALKNER, KEMP  
1431 RIVERPLACE BLVD  
1110  
JACKSONVILLE, FL 32207 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: FALKNER, KEMP  
Address: 1431 RIVERPLACE BLVD APT 1110  
City-St-Zip: JACKSONVILLE, FL 32207 US

I hereby 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 all other like empowered.

SIGNATURE: KEMP FALKNER

PRES

04/27/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date