

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000037522

FILED
Sep 02, 2008
Secretary of State

Entity Name: WATERPROOFING UNLIMITED, INC.

Current Principal Place of Business:

103 BASS AVE SW
FORT WALTON BEACH, FL 32548

New Principal Place of Business:

103 BASS AVE SW
FORT WALTON BEACH, FL 32548 OK

Current Mailing Address:

PO BOX 396
FT WALTON, FL 32549

New Mailing Address:

PO BOX 396
FT WALTON, FL 32549 OK

FEI Number: 59-3512126

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANN O'CONNER ACCOUNTING SERVICE
424 CANTERBURY COURT
FORT WALTON BEACH, FL 32548 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: DPTS () Delete
Name: FINAN, TAMARA
Address: 103 BASS AVE SW.
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: T () Delete
Name: SWEENEY, BOONCHUN
Address: 103 BASS AVE SW.
City-St-Zip: FORT WALTON BEACH, FL 32548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: TAMARA A. FINAN

PRES

09/02/2008

Electronic Signature of Signing Officer or Director

Date