FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED PROFIT ELORIDA DEPARTMENT DE STATE May 07 1998 8:00am **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 642515 (1)KREEPY KRAULY U.S.A., INC. Principal Place of Business Mailing Address 13801 NW 4TH STREET 13801 NW 4TH STREET SUNRISE FL 33325 SUNRISE FL 33325 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/22/1979 2. Principal Place of Business 2a. Mailing Address Applied For (10 1 P. PKW/26) 403 JAWGRASS COIP PEW. 403 JAWGRASS 59-1933161 Not Applicable Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State 6. Election Campaign Financing \$5.00 May Be SUNRISE FL W INNRISE 23 Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 25 29 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent 81 Name VORBRICH, LARRY 1130 FAIRFAX LANE Street Address (P.O. Box Number is Not Acceptable) 82 FT. LAUDERDALE FL 33326 83 84 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or printed name of regedered agent and title if applicable (NOTE Registored Agent signature required when rainstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change 11 TITLE TITLE CHAUVIER, DANIEL NAME **1.2 NAME** 2363 S. OCEAN BLUD 18801 NW 4 STREET STREET ADDRESS 1.3 STREET ADDRESS BEACH FL 33487 SUNRISE FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE VORBRICH, LARRY 2.2 NAME NAME 1130 FAIRFAX LANE 12801 NW-4TH STREET STREET ADDRESS 2.3 STREFT ADDRESS SUNRISE FL-33326 CITY-ST-ZIP 2.4 GITY-ST-ZIP Change DELETE Addition TITLE 31 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 34. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 41 TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition Change TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 trusted emported to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an addition.

4/28/98

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