

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 22 AM 9:55

DOCUMENT # F94000002805 (9)

1. Corporation Name

AQUAGENIX, INC.

Principal Place of Business

6500 N.W. 15TH AVE.
FT. LAUDERDALE FL 33309

Mailing Address

6500 N.W. 15TH AVE.
FT. LAUDERDALE FL 33309

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

05/27/1994

3a. Date of Last Report

2. Principal Place of Business

21

Suite, Apt. #, etc.

23. City & State

24. Zip

25. Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27. City & State

28. Zip

30. Country

4. FEI Number

65-0419263

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

CORPORATION INFORMATION SERVICES, INC.
1201 HAYS ST.
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida 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 registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	RADLER, ROBERT A
STREET ADDRESS	6500 N.W. 15TH AVE.
CITY-ST-ZIP	FT. LAUDERDALE FL 33309
TITLE	VD
NAME	CHESLER, ANDREW P
STREET ADDRESS	6500 N.W. 15TH AVE.
CITY-ST-ZIP	FT. LAUDERDALE FL 33309
TITLE	STD
NAME	CHESLER, ALAN H
STREET ADDRESS	6500 N.W. 15TH AVE.
CITY-ST-ZIP	FT. LAUDERDALE FL 33309
TITLE	D
NAME	NISSFELD, ROBERT H
STREET ADDRESS	6500 N.W. 15TH AVE.
CITY-ST-ZIP	FT. LAUDERDALE FL 33309
TITLE	D
NAME	FISCHLER, ABRAHAM S
STREET ADDRESS	6500 N.W. 15TH AVE.
CITY-ST-ZIP	FT. LAUDERDALE FL 33309
TITLE	D
NAME	KRULIK, GARY
STREET ADDRESS	6500 N.W. 15TH AVE.
CITY-ST-ZIP	FT. LAUDERDALE FL 33309

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 trustee empowered to execute this report as required by Chapter 807, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or as an attachment with an address.

SIGNATURE:

Robert Radler, President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
ROBERT RADLER, PRES.

3/16/95 (3ar) 975-7771