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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000025535

AQUA SERVICES WATER CONDITIONING & PUMP REPAIR, INC.

Principal Place of Business	Mailing Address
973 NE INDUSTRIAL BLVD JENSEN BEACH FL 34957 US	2802 NE SPRUCE RIDGE AVE. JENSEN BEACH FL 34957

FILED Apr 01, 1999 8:00 am Secretary of State

04-01-1999 90085 023 ***150.00 04-01-1999 90085 024 *****8.75



US	1 FL 34957	JENSEN BEACH I'L 34907			DO NOT WRITE IN THIS SPACE				
03					3. Date incorporated or Qualifed				
						03/30/1995			
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number			Applied For
21	- united	26				65-0581328			Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired	V	+ - · · ·	Additional
22		27				5. Certificate of Status Desired	<u> </u>	Fee	Required
City & State	е	City & State .				6. Election Campaign Financing	П		May Be
23	28				·	Trust Fund Contribution		Adde	d to Fees
Zip	Country Zip			гу		8. This corporation owes the curr	ent year Inta		
24	25	29	30			Personal Property Tax.		☐Yes	□No
	9. Name and Address of Currer	t Registered Agent		.a.l		10. Name and Address of New F	egistered A	Agent	
VERBEECK, STEVEN A			8	ויי	Name				
			8	2	Street Ad	ddress (P.O. Box Number is Not Accepta	ible)		
2802 NE SPRUCE RIDGE AVE.			_						
JEN	SEN BCH_FL 34957		8	3					Ì
			8	4	City			85 Zi	p Code
		<u> </u>					<u> </u>	_للل	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statute	s, the abo	ve-	-named co	orporation submits this statement for the ation's board of directors. I hereby accept	purpose of o	changing itment as	registered registered
agent. I a	m familiar with, and accept the obliga	tions of, Section 607.0505, Flor	ida Statute	3 5.	.A	al. I and	: 1/1	00	
SIGNATURE	1 1. 8		Stev	U	ΛH.	Verneeck	1-14.	99	
	Signature, typed or printed name of registered age		Registered Ag	gent	signature req	uired when reinstating) ADDITIONS/CHANGES TO OF	DATE	D DIBEC	TOPS IN 12
12.	P 5 TK UKN VCr	DELETE DELETE	1.1 TITLE			ADDITIONS/CHANGES TO OF	FICERS AN	☐ Chang	
TITLE	<u> </u>	Dee Colone	1						
NAME	VERBEECK, STEVEN A		1.2 NAME		4000000				
STREET ADDRESS	2802 NE SPRUCE RIDGE AVE		1 ···		ADDRESS				l l
CITY-ST-ZIP	JENSEN BEACH FL 34957	DELETE	1.4 CITY-		-ZIP			Chang	e Addition
TITLE	VST		2.1 NAME						_
NAME	VERBEECK, DIANE				ADDRESS		_		
STREET ADDRESS	2802 NE SPRUCE RIDGE AVE JENSEN BEACH FL 34957								ì
CITY-ST-ZIP	JENSEN BEAUTI FL 34937	DELETE	2. 4 CITY 3.1 TITLE		21P	<u> </u>		Chang	e Addition
TITLE			3.2 NAMI					_	_
NAME					ADDRESS				J
STREET ADDRESS	-		3.4. CITY						}
CITY-ST-ZIP		☐ DELETE	4.1 TITLE		415		_	Chang	e Addition
NAME			4. 2 NAM		ļ				ļ
STREET ADDRESS				-	ADDRESS				
CITY-ST-ZIP			4.4 CITY		ŧ				
TITLE		☐ DELETE	5.1 TITLE	_			-	Chang	je 🗌 Addition
NAME .			5.2 NAMI	E					
STREET ADDRESS			5.3 STRE	EET /	ADDRESS				ļ
CITY-ST-ZIP			5.4 CITY	-ST	ſ-ZIP				
TITLE		☐ DELETE	6.1 TITLE	Ę	$\overline{}$,		Chang	e Addition
NAME	(6.2 NAM	Ε					
STREET ADDRESS	1 1		6.3 STRE	EET.	ADDRESS				
CITY-ST-7IP	\	1	6.4 CITY	-ST-	-ZIP				

14. I hereby certify that the information supplied with this filing does indicated on this annual report of supplemental annual report is officer or director of the corporation of the receiver or trustee on Block 12 or Block 13 if changed, or on an attachment with all and the supplemental content of the corporation of the receiver or trustee on Block 12 or Block 13 if changed, or on an attachment with all and the supplemental content of the corporation of the corporation. not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE: