

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jul 31, 2003 8:00 am**  
**Secretary of State**

0118042 AV

DOCUMENT # **P95000025535**



01-30-2003 90109 008 \*\*\*150.00  
07-31-2003 90066 018 \*\*\*150.00

1. Entity Name  
**AQUA SERVICES WATER CONDITIONING & PUMP REPAIR, INC.**

Principal Place of Business  
~~8507 SW 18TH AVENUE~~  
~~STUART FL 34997~~  
~~US~~

Mailing Address  
~~8507 SW 18TH AVENUE~~  
~~STUART FL 34997~~  
~~US~~



2. Principal Place of Business  
**8507 SW 18th Ave**  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State  
**Stuart Florida**  
Zip  
**34997**

City & State  
**STATE**  
Zip  
**STATE**  
Country

4. FEI Number **65-0581328**  
Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**VERBEECK, STEVEN A**  
**8507 SW 18TH AVE**  
**STUART FL 34997**

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>VERBEECK, STEVEN A</b> <b>8507 SW 18TH AVE</b> <b>STUART FL 34997</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VST</b> <b>VERBEECK, DIANE</b> <b>8507 SW 18TH AVE</b> <b>STUART FL 34997</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 report or supplemental 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

**7/14/03 772-334-1003**

Date

Daytime Phone #

CR2E034 (4/03)

Attachment #

Aqua Services Water Conditioning  
& Pump Repair  
8628 SW 18<sup>th</sup> Avenue  
Stuart, FL 34997

80134733

~~PR5000025535~~

July 14, 2003

Florida Department of State  
Division of Corporations  
Uniform Business Reports Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Re: Uniform Business Report - FEIN # 65-0581328

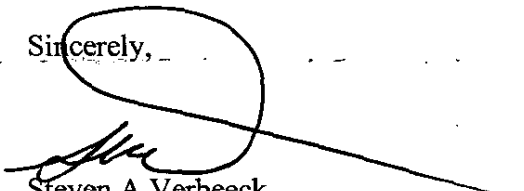
To Whom It May Concern:

Please find enclosed 2003 For Profit Corporation Uniform Business Report for Aqua Services Water Conditioning & Pump Repair. We have enclosed a check for \$150 for the 2003 annual fee. We did not receive the original Uniform Business Report as it was not forwarded from our old address. We did finally receive the delinquent notice in July 2003. Please update your records with our current address.

Due to the above circumstances, we respectfully request all of the associated fees and penalties be waived.

If you have questions please contact me at 772-334-1003

Sincerely,

  
Steven A Verbeeck  
President

Enclosures