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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Apr 28 1997 8:00am Secretary of State

1997

DOCUMENT # P9600002265 (2)

AQUAPURE ENTERPRISES, INC.

|--|--|

| Principal Place of Business | Mailing Address | | 1 (00)(00) NE 19(19 0(1)) OBIH BONI OBIN BONI BONI HOLO HILL HILL O'IN (100) |
|---|---------------------------------------|----------------------------|--|
| 2000 ROYAL MARCO WAY #303 | P.O. BOX 1516 | • | |
| MARCO ISLAND FL 33937 | MARCO ISLAND FL 34146-1511 | b | |
| | | | 3. Date Incorporated or Qualified 3a. Date of Last Report |
| | | | 01/02/1996 N/A |
| 2. Principal Place of Business Wage (1) | 2a. Mailing Address | -/)(-) | 4. FEI Number Applied For Not Applied For Not Applied For |
| 21 2000 ROYAL MARCOWAY | 26 P.O. VDS | <u> </u> | |
| Suite, Apt #, etc. 22 3 0 3 | Suite, Apt. #, etc. | | 5. Certificate of Status Desired \$8.75 Additional Fee Regulred |
| 22 303 City & State | City & State | | 6. Election Campaign Financing \$5.00 May Be |
| 23 MARCO SCAND, FC | 1 1 | AUD, F | Trust Fund Contribution |
| Zip Country | Zip | Country | This corporation has liability for intaggible tax under s. 199.032, |
| 24 734145 25 USA | 29 34146 30 | USX | Florida Statutes Yes No |
| 9. Name and Address of Current | Registered Agent | 5-21 | 10. Name and Address of New Registered Agent |
| SCHIERING, JAMES L | | 81 Nar | ne l |
| 2000 ROYAL MARCO WAY #303 | | 82 Stre | eet Address (P.O. Box Number is Not Acceptable) |
| MARCO ISLAND FL 33937 | | 83 | |
| | | 03 | |
| | | 84 City | FL 85 Zip Code |
| 11 Purcuant to the provisions N Sections 607 0502 | and 607 1508. Florida Statutes | the above-nam | 7 |
| office or registered agent, of both, in the State of | I Florida. Such change was auth | orized by the o | ned corporation submits this statement for the purpose of changing its registered corporation's board of directors. I hereby accept the appointment as registered |
| | ons or, section 607.0505 Florid | ERINGS. | 2/10/07 |
| SIGNATURE Square by pool of printed hards of registered agono | | | ature required when reinstating) DATE |
| 12. OFFICERS AND | RECTORS | 13. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TOLE | DELETE | 1.1 TITLE | P/T Change Addition |
| NAME V | | 1.2 NAME | BARBARA G. SCHIERING |
| STREET ADDRESS | | 1.3 STREET ADDRE | - P-1 |
| C(TY-ST-ZIP | T DELETE | 1.4 CITY-ST-ZIP | MARCO TELAND, FL 34145 Change (2) Addition |
| TITLE | DELETE | 2.1 TITLE | The state of the s |
| NAME | | 22 NAME 23 SYREET ADDRE | SS 2000 ROYAL MARCO WAY \$303 |
| STREET ADDRESS | | 2.4 CITY-ST-ZIP | MARW ISLAND, FL 34145 |
| CHY-SI-ZIP | DELETE | 3.1 TITLE | Change Addition |
| NAME | | 3.2 NAME | |
| STREET ADDRESS | | 3.3 STREET ADDRE | 28 |
| CHY-ST-ZIP | | 3.4. CITY - ST - ZIP | |
| TITLE | ☐ DELETE | 4.1 TITLE | Change Addition |
| NAME | | 4. 2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADORE | SS |
| CITY-ST-ZIF | | 4.4 CITY-ST-ZIP | |
| TITLE | ☐ DELETE | 51 TITLE | Change L. Addition |
| NAME | | 5.2 NAME | 4/11/1/99 |
| STREET ADDRESS | | 5.3 STREET ADDRE | *! noono21599#bj/20//! |
| CITY-S1-ZiF | Theirte | 5.4 CiTY-ST-ZIP | 000002159920 Addition ***165.00 |
| FILE | ☐ DELETE | 61 TITLE | ***165.00 |
| NAME | | 62 NAME | i l |
| STREET AODRESS | | 6.3 STREET ADDRE | 35 |
| City-St-ZiP | with this filing does not qualify for | 6.4 CITY-ST-ZIP | on stated in Section 119 07/3Vi). Florida Statutes: I further certify that the |

4. Too hereby certify that the information supplied with this filing boes not quality for the exemption islated in Section 118-07(3)(i), Portical statutes. Find the information indicated on this arrival report or suppliemental 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 tuisted empewered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 jt phanged or on an attachment with an addition.

SIGNATURE:

TATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RESIDENT 3/10/97 CO

Daytime Phone I