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

FILED PROFIT May 05 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT #** (3)185083 BROADVIEW PARK WATER COMPANY Principal Place of Business Mailing Address 1955 8 W 50 AVE 1855 S W 50 AVE FT LAUDERDALE FL 33317 FT LAUDERDALE FL 33317 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/09/1955 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-0745265 Not Applicable 26 Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5,00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 29 Personal Property Tax due June 30. Yes 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SCHWAB, MICHAEL H 1955 S W 50TH AVE 82 Street Address (P.O. Box Number is Not Acceptable) FORT LAUDERDALE FL 33317 83 RA City 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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change TITLE 1.1 TITLE MICHAEL, ISIDOR 1.2 NAME NAME 3400 S. OCEAN DR. #3F STREET ADDRESS 1.3 STREET ADDRESS PALM BCH FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE SCHWAB. MICHAEL NAME 2.2 NAME 1955 S W 50 AVE 2.3 STREET ADDRESS STREET ADDRESS FT LAUDERDALE FL 33317 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 3 1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADORESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST-2IP CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE

6.2 NAME

CHHED

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 14. Thereby 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 eport 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 receiptr or full to appears in

NAME

STREET ADORESS

SIGNATURE:

officer or director of the corporation Block 12 or Block 13 if changed or