

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 FEB 16 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **452464** (1)
1. Corporation Name
DADE COUNTY WATER PURIFICATION SYSTEMS, INC.

Principal Place of Business Mailing Address
1570 W 43RD PL SUITE 26, 2ND FLOOR HIALEAH FL 33012

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/06/1974	3a. Date of Last Report 04/27/1994
21	Suite, Apt. #, etc.		26	4. FEI Number 59-1529328	Applied For Not Applicable
22	City & State		27	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip		28	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country		29	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
HERRERA, MIRTHA R.				81 Name HERRERA HERIBERTO J.			
1570 WEST 43RD PLACE				82 Street Address (P.O. Box Number is Not Acceptable) 1570 WEST 43RD PLACE			
STE #26, 2ND FLOOR				83 STE # 26, 2ND FLOOR			
HIALEAH FL 33012				84 City HIALEAH FL 33012 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 re-registering) DATE _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	1.1 TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	HERRERA, HERIBERTO R	1.2 NAME	HERRERA HERIBERTO R.				
STREET ADDRESS	16815 NW 83RD COURT	1.3 STREET ADDRESS	16815 NW 83rd COURT				
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	MIAMI FL				
TITLE	S	2.1 TITLE	P	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	HERRERA, HERIBERTO J	2.2 NAME	HERRERA HERIBERTO J.				
STREET ADDRESS	16815 NW 83RD COURT	2.3 STREET ADDRESS	16815 NW 83RD COURT				
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	MIAMI FL				
TITLE	PT	3.1 TITLE	S	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	HERRERA, MIRTHA R.	3.2 NAME	HERRERA MIRTHA R.				
STREET ADDRESS	16815 NW 83RD COURT	3.3 STREET ADDRESS	16815 NW 83rd COURT				
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	MIAMI FL				
TITLE		4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME		4.2 NAME					
STREET ADDRESS		4.3 STREET ADDRESS					
CITY-ST-ZIP		4.4 CITY-ST-ZIP					
TITLE		5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME		5.2 NAME					
STREET ADDRESS		5.3 STREET ADDRESS					
CITY-ST-ZIP		5.4 CITY-ST-ZIP					
TITLE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME		6.2 NAME					
STREET ADDRESS		6.3 STREET ADDRESS					
CITY-ST-ZIP		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(9)(a), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Heriberto J. Herrera* President 2-8-95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR