2002 UNIFORM BUSINESS REPORT (UBR)

2002 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # 563286 1. Entity Name AQUA-SHIELD CORP.							FILED Feb 21, 2002 8:00 am Secretary of State 02-21-2002 90065 001 ***150.00					
Principal Place of Business 2012 HARDING STREET HOLLYWOOD FL 33020 US 2. Principal Place of Business			Mailing Address 2950 N 28TH TERRACE HOLLYWOOD FL 33020 US 3. Mailing Address									
2 93 Suite, Apt	0 N. 28* . #, etc.	n/essace	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE					
City & Stat	wood +	-/a	City & State			4. F	FEI Number	59-180696	1	<u> </u>	pplied For ot Applicable	
220	20 Cour	tr×A	Zip	Count	гу	5. (Certificate of	Status Desired		\$8.75 Ad		
טעע	6. Name and Ac	dress of Current Re	egistered Agent	 		7. N	Name and A	ddress of New	Registered			
SCHATZ, RICHARD ESQ 150 WEST FLAGLER ST SUITE 2200					Street Address (P.O. Box Number is Not Acceptable)							
MIAMI FL 33130					City				FL	Zip Cod	le	
Tax filing	oration is eligible to s requirement and elec ria on back)		FILE NOW After May 1, 20 Make Check Paya	!!!! FEE I 002 Fee v	vill be \$550.0	0	10. Elect	ion Campaign Fi Fund Contributi			O May Be d to Fees	
TITLE NAME STREET ADDRESS CITÝ-ST-ZIP	P FREDERICK, LEO 2950 N. 28TH TE HOLLYWOOD FL	RRACÉ	RECTORS Delete		T ADDRESS ST-ZIP	AD	DITIONS/C	HANGES TO OF	FICERS ANI	DIRECTOR Change	S IN 11	
TULE NAME STREET ADDRESS CITY-ST-ZIP	SD STRUNIN, RICHAI 2950 N 28TH TER HOLLYWOOD FL	RD RRACE	☐ Delete		T ADDRESS ST-ZIP		<u>, </u>			Change	☐ Addition	
TITLE NAME	D GOMBERG, GENE 2950 N 28TH TER HOLLYWOOD FL	RRACE	☐ Delete		T ADDRESS ST-ZIP	_	_			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TCFO CHRISTENSEN, S 2950 N 28TH TER HOLLYWOOD FL	TEVEN J RRACE	☐ Delete	B	T ADDRESS ST-ZIP		_			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PATTERSON, SCI 2950 N 28TH TER HOLLYWOOD FL	OTT D RRACE	☐ Delete		T ADDRESS ST-ZIP					Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREE CITY-S	T ADDRESS		_		_	Change	Addition	
13. I hereby of indicated of the corchanged	certify that the information this report or sup- reporation or the received, or on an attachment	ation supplied with the plant of the plant o	is filing does not qualify for the and accurate and that ered to execute this report that other like empowered	or the exem my signatu t as require	nption stated in ire shall have the ad by Chapter i	Section ne same I 607, Flori	119.07(3)(i), legal effect a da Statutes;	Florida Statutes. Is if made under and that my nan	I further ce oath; that I ne appears	rtify that the in am an officer in Block 11 o	nformation or director r Block 12 if	

SIGNATURE:

Steven J. Christensen