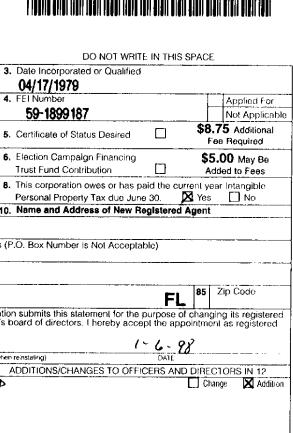
FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (0)617719 FLORIDA SEWER AND WATER, INC. Principal Place of Business Mailing Address 13790 N.W. 4TH STREET. SUITE #102 13790 N.W. 4TH STREET, SUITE #102 SUNRISE FL 33325 SUNRISE FL 33325 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/17/1979 2. Principal Place of Business 2a. Mailing Address FEI Number 21 59-1899187 26 Suite, Apt. #, etc. Suite, Apt #, etc 5. Certificate of Status Desired 22 27 City & State City & State 6. Election Campaign Financing 23 28 Trust Fund Contribution Country Country Zio 24 25 29 30 Personal Property Tax due June 30. X Yes 10. Name and Address of New Registered Agent g, Name and Address of Current Registered Agent 81 Name STOKES, RITA A 13790 NW 4TH STREET Street Address (P.O. Box Number is Not Acceptable) SUITE 102 83 SUNRISE FL 33325 84 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. ered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS 13. TITLE DELETE 1.1 TILLE 5/D STOKES, RITA NAME 1.2 NAME 3025 SORREL COURT

Apr 10 1998 8:00am Secretary of State



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CITY-ST-ZIP	FT LAUDERDALE FL		1.4 CITY - ST - ZIP			
TITLE	PVD	DELETE	2.1 TITLE		Change	Addition
NAME	STOKES, MICHAEL		2.2 NAME			
STREET ADDRESS	3025 SORREL COURT		2.3 STREET ADDRESS			
CITY-ST-ZIP	FT LAUDERDALE, FL 00000		2, 4 CITY-ST-ZIP			
TITLE		DELET e	3.1 TITLE		Change	Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
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NAME			4. 2 NAME			
STREET ADDRESS	*		4.3 STREET ADDRESS			
CITY-ST-2IP			4.4 CITY-ST-ZIP			
TITLE	····	DELETE	5.1 TITLE		Change	Addition
NAME			5 2 NAME			
STREET ADDRESS		1	5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY+ST-ZIP			
TITLE		DELETE	6.1 TIFLE		Change	Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREE1 ADDRESS			
CITY - ST - ZIP			6.4 CITY - ST - ZIP			
14. 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 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 Statute and that my name appears in						

Block 12 or Block 13 if changed, or on an attacty nent with an address