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

PROFIT CORPORATION ANNUAL REPORT 1998

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F09758

(6)

TROPICAL NATURAL WATER CO.

FILED Jan 15 1998 8:00am Secretary of State

INOPICAL NATURAL WATER CO.				
Principal Place of Business	Mailing Address			ibit dibit bilti bilti nibit deli
8156 NW 74TH AVE P.O. BOX 450917 MIAMI FL 33166	6158 NW 74TH AVE P.O. BOX 450917 MIAMI FL 33166		DO NOT WRITE IN THI	S SPACE
US	US		3. Date Incorporated or Qualified 10/22/1980	
2. Principal Place of Business 21	2a. Mailing Address 26		4. FE‡ Number 59-2075221	Applied For Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country 25	Zip 30	Country	This corporation owes or has paid the operation of the Personal Property Tax due June 30.	☐ Yes ☐ No
9. Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of New Registere	d Agent
MARESMA, RAFAEL YEKOMARUN DRIVE	address		ess (P.O. Box Number is Not Acceptable)	
1	0 Harris Pl.	83		
Miam	ni Lakes, Fl. 33014	84 City	F	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 II applicable. (NOTE Registered Agent signature required when releasiating).				
12. OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE PD	☐ DELETE	1.1 TITLE		Change Addition
NAME MARESMA, RAFAEL		1.2 NAME		
STREET ADDRESS PARK MARKIN ROAD, new	address	1.3 STREET ADDRESS		Į.
	Harris Pl.	1.4 C(1)Y - S1 - 7(P		
TITLE STD MMian	ni, Fl. DELETE	2.1 TITLE		Change Addition
NAME MARESMA, KENIA		2.2 NAME		
	40 Harris Pl.	2.3 STREET ADDRESS		
CITY-ST-ZIP MIAMI PL Mia	mi Lakes, Fl.	2. 4 CHY · ST · ZIP 3 1 THLE		Change Addition
NAME 330	714	3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
City-St-ZIP		3.4 CITY-ST-ZIP		
TITLE	☐ DELETE	4.1 TITLE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY - S1 - ZIP		
TITLE	DLIFTE	5 1 TITLE		☐ Change ☐ Addition
NAME		5 2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	DELETE	5.4 C(1Y-ST-ZIP 6.1 TITLE		Change Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		
14. I hereby certify that the information supplied wi	ith this filing does not qualify for t	the exemption stated in S	Section 119.07(3)(i), Florida Statutes I further	certify that the information

indicated on this annual report or supplied with this limit does not qualify for the exception stated in Section 19.07(3)(), Florida statutes Floring that in limit make under 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.

AIANIATURE.

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