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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Jan 22 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9600005076 (2)

MACKE WATER SYSTEMS, INC.

Principal Place	e of Business	Mailing Address	Mailing Address 122 MESSNER DR WHEELING IL 80090-6434			I SAMILAN INIM LAURA ALIAN ANNIN MALLE ANSILE	MR(15) ATIMI TI)(1	*****		
122 MESSNER WHEELING IL (
						3. Date Incorporated or Qualified 10/01/1996	3a. Date o	of Last Re	eport	
2. Principal P	face of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number		Ap	plied For	
21		26				36-3663786			t Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	7			5. Certificate of Status Desired	\$	\$8.75 Additional Fee Required		
City & Stat	e e	City & State				6. Election Campaign Financing \$5.00 May 8e				
23	Country	28 Z-p	p Country			Trust Fund Contribution		Added to		
Zip	25	29	30	ниу		8. This corporation has liability for intangible tax under s. 199,032, Florida Statutes ☑ Yes ☐ No				
24		and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
COE	RPORATION SERVICE COMPAN			81	Name					
	1 HAYS STREET	**		82	Ctroot Add	and (D.O. Day Murchas is Mat Assertab	101			
	LAHASSEE FL 32301-2525		ļ	54	Street Add	ress (P.O. Box Number is Not Acceptab	ie)			
17.44			Ì	83						
			}	84	City		E 8	35 Zip C	Code	
44 1	t. d	(O) and COZ 1500 Funida Plat	the the el		nomed see	aration or books this abstances for the or	FL	anaina it	o rogistorod	
office or r	registered agont, or both, in the Sta	ite of Florida. Such change was	s authorized	yd t	the corpora	poration submits this statement for the p tion's board of directors. I hereby accep	orpose or circle t the appoint	ment as	registered	
agent. La	im familiar with, and accept the obt	igations of, Section 607.0505, F	Horida State	utes.						
SIGNATURE	Signal ire, typed or profiled harne of registered a	secon and the it applicable (NC	115 Renistered	1 Agen	t signstyre requi	ired when reinstating)	DATE		······································	
12.	F	IND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC		RECTOR	S IN 12	
1 1LF	DT	DELETE	1.1 TITLE		T			Change	Addition	
NAME	SPAGAT, MATTHEW		1.2 NA	ME	1				!	
STREET ADDRESS	122 MESSNER DR		1,3 ST	REET A	ADDRESS			-		
CITY - ST - ZIF	WHEELING IL 60090		1.4 011	TY- <u>\$</u> T	- ZIP					
TITLE	DV □ DELETE			LE				Change	Addition	
3MAN	SEIDEN, JEROME		2.2 NAME		Ţ				į	
STREET ADDRESS	122 MESSNER DR		2.3 ST	REET #	ADDRESS		et u			
City - St - ZiP	WHEELING IL 60090		2 4 CI		T-ZIP	*				
TITLE	P	L] DELETE	3.1 717		ĺ		L	Change	Addition	
NAME	SEIDEN, PHILIP		32 NA							
STREET ADDRESS	122 MESSNER DR				ADDRESS					
C(1Y - S1 - ZIP TITLE	WHEELING IL 60090 S	DELETE	3 4. CI 4 1 TH		T-ZIP			Change	Addition	
NAME	ERL, CHRISTINA		4. 2 NJ				سا	o ango		
STREET ADDRESS	122 MESSNER DR				ADDRESS					
CITY+ST-ZIF	WHEELING IL 60090		4.4 CII							
TITLE	THELLING IL GOOST	DELETE	5.1 TIT		- 711			Change	Addition	
NAME			5.2 NA					_		
STREET ADDRESS			5.3 ST	REETA	ADDRESS					
CITY-ST-ZIP			5.4 CI	1Y-S1	-ZIP					
TITLE		DELETE	6.1 TIT		*******			Change	Addition	
NAMÉ		1 / .	6.2 NA	ME						
STREET ADDRESS	1	(A A)	6381	HEET A	ADDRESS					
CITY-ST-2IP		XI / J	6.4 Ci							
14. I do here	by certify that the information supplied in adjusted on this admiral resort of	tied with this filing does not quartered is	alify for the	exer	nption state	d in Section 119.07(3)(i), Florida Statute	s. I further ce I effect as if r	rtify that made unr	the der oath: that	
l arn an c	theer or director of the corporation	of the requiver or trustee empo	owered to e	xecu	te this repo	it my signature shall have the same lega ort as required by Chapter 607, Florida S	tatutes, and	that my n	iame	
appears t	нь ыюск ки ог втоок из II с и ал у (ео,	. דיר און arranasımem with an ac	uurdss.							

JEROME SEIDEN