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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name F97000003192 (8)

AQUATHOUGHT LABS G.P., INC.

FILED May 08 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				- I INCESSOR TIMO INSTITUTO IN CONTRACTOR DESCRIPTION OF THE PROPERTY OF THE P	
SUITE 1800, 1000 ABERNATHY ROAD, N.E. SUITE 1800, 1000 ABERNATHY ATLANTA GA 30328 ATLANTA GA 30328			ATHY ROAD, N.E.	DO NOT WRITE IN THE	S SPACE
				 Date Incorporated or Qualified 06/18/1997 	
2. Principal P	ace of Business	2a. Mailing Address		4. FEI Number 58-2322/64	Applied For
21		26		APPLIED FOR	Not Applicable
Sulte, Apt.	#. etc.	Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	3	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the o	urrent year Intangible
24	25		30	Personal Property Tax due June 30.	Yes No
	9, Name and Address of Curre		81 Name	10. Name and Address of New Registere	d Agent
	RPORATION SERVICE COMPA	NY	81 Name	David lale.	
→ 1201 HAYS STREET			82 Street Add	ress (P.O. Po.,umper No"	$\overline{\mathcal{D}}_{\alpha}$
TAL	LAHASSEE FL 32301-2525		83	610 Paice Olive	<u> </u>
			"		
-			84 City	Myars F	85 72 200
11 Pureupnt	the provisions of Soctions 607 Of	02 and 607 1508. Florida Statulo	s the above-named corr		
office or r	egistered agent, or both, in the State	te of Florida. Such change was a	uthorized by the corporal	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	ppointment as registered
ĺ	m tagamat syally and accept the oil	garions of, Section 607.0505, Floi	Color Statutes.	.7	10/00
SIGNATURE	Signature, type for profest panic of registerists	Foliar displicable (NOTE	Registered Agent signature requi	red when reinstating) DATE	<u> </u>
12.		NO DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AT	VD DIRECTORS IN 12
TITLE	PSTD	☐ DELETE	1.1 TITLE		Change Addition
NAME	COLE, DAVID M		12 NAME		
STREET ADDRESS	14610 LAKE OLIVE DRIVE		1.3 STREET ADDRESS		į
CITY-ST-ZIP	FT MYERS FL		1.4 C/TY - S1 - Z/P		
TITLE	CD	☐ DELETE	2.1 THLE		Change Addition
NAME	JACOBY, JAMES F		2.2 NAME		
STREET ADDRESS	STE 1800, 1000 ABERNATH	Y RD., NE	2.3 STREET ADDRESS	. •	
CITY-ST-ZIP	ATLANTA GA	T DELETE	2. 4 CITY- ST- ZIP		Change Addition
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME 070557 +D005500			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		DILETE	3 4. CITY-ST-7IP		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CiTY · ST - ZIP		
TITLE		DELFTE	5.1 TITLE		☐ Change ☐ Addition
NKME			5.2 NAME		- '
STREET ADDRESS			5.3 STREET ADDRESS		
CITY,-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			62 NAME		Ì
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-SY-ZIP			6.4 CITY-ST-ZIP		
1 44 1 5	-1:4 . 4b -1 . 4t - 1:41 - 1:41 - 1:41	15 th filling days and a size for		Cartier 440 07(0)() Fladda Otat day I fadhar	and the state of t

nereus cerus mai me information supplied with this tiling does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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 frustee 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.