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 # F9700006937 (3)

WATERWORKS/PDS ASSOCIATES, INC.

FILED Mar 05 1998 8:00am Secretary of State

29 PARK AV		Mailing Address 29 PARK AVENUE	9 PARK AVENUE							
DANBURY C	1 06810	DANBURY CT 06810				טט אט	WRITE IN THIS	SPACE		
					-	3. Date incorporated or Qu 12/19/1997				7
	Place of Business OO NE 2nd Auc	2a. Mailing Address 26			-	4. FEI Number APPLIED FOR	06-08	≺ α∡! !⊿ 	pplied For of Applicable	1
Suite, Apt.		Suite, Apt. #, etc.			- 1	5. Certificate of Status Des	ired 5		Additional equired	1
	omi, Fl	City & State			•	Election Campaign Final Trust Fund Contribution	noing		May Be to Fees	
Zip 24 33'		Zip 29	30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes				
110	9, Name and Address of Current		81	Name		D. Name and Address of I	New Registered	Agent		4
UNITED CORPORATE SERVICES, INC. 801 NORTHEAST 167TH STREET - SUITE 300					9					
NORTH MIAMI BEACH FL 33162				Street	Address	Address (P.O. Box Number is Not Acceptable)				
			84	City			FL	85 Zip	Code	1
11. Pursuant office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Statu of Florida. Such change was	tes, the above authorized b	e-named y the cor	d corporat	ion submits this statement f board of directors. I hereb		changing if cintment as	ts registered registered	1
_	m familiar with, and accept the obliga-	tions of, Section 607.0505, Fl	lorida Statute	S.					•	l
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable. (NO	TE: Registered Ag	eni signaluri	re required wh	en reinstating)	DATE			_
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO	OFFICERS AND	DIRECTOR	₹S IN 12	15
TITLE	PD CALLICY A D	☐ DELETE	1.1 TOTLE					Change	Addition	18
NAME	SALLICK, A P 29 PARK AVENUE		1.2 NAME						15	
STREET ADDRESS	DANBURY CT 06810		1.3 STREET							Į
CITY-ST-ZIP	EVSD			ST-ZIP						٦Ş
TITLE	SALLICK BARRADA G		2.1 TITLE		1			☐ Change	☐ Addition	١٩
NAME	29 PARK AVENUE		2.2 NAME	2.2 NAME						
STREET ADDRESS	DANBURY CT 06810			ADDRESS						
CITY-ST-ZIP	0	DELETE	2. 4 CITY-	ST-ZIP				T Alexandria		1
TITLE	LERNER, MICHAEL	DELETE	3.1 TITLE					☐ Change	Addition	
NAME	29 PARK AVENUE		3.2 NAME							ı
STREET ADDRESS	DANBURY CT 06810		3.3 STREET							
CITY-ST-ZIP TITLE		☐ DELETE	3.4. CITY- 4.1 TITLE	ST-ZIP	.,			☐ Change	Addition	4
NAME		orecie	4.2 NAME		<u>د ۲</u>	thia M. McN	2mara	☐ Crittings	2 Controll	
STREET ADORESS			4.3 STREET	ADDRESS	124.	lues Form F	24			
CITY-ST-ZIP			4.4 CITY-5		1	wster, NY	10509			
TITLE		DELETE	5.1 TITLE	I I ~ EJF	- 311	W6 70. 1 10 1	1000-	Change	Addition	1
NAME			5.2 NAME							
STREET ADDRESS			5.3 STREET	ADDRESS						
CITY-ST-ZIP			5.4 CITY-5							1
TITLE		DELETE	6.1 TITLE	· Ln	 			Change	Addition	1
NAME		_	6.2 NAME							
STREET ADDRESS			6.3 STREET	ADDRESS						
CITY-ST-ZIP			6.4 CITY - 5							ŀ
	artifu that the information supplied with	this filing does not qualify for			ad in Post	inn (10 07/3)(i) Florida Ota	tuton I further an	-A16 . A1 A A1	information	4

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 Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

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