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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

Katherine Harris ANNUAL REPORT Secretary of State 1999

Feb 25, 1999 8:00 am Secretary of State

02-25-1999 90088 041 ***150.00

DOCUMENT # F9800000235 1. Corporation Name HYDRA INDUSTRIES, INC.					
Principal Place	of Business	Mailing Address			T (TRAINER TEIGH I DUAN I BREIN BREIN BREIN BREIN BREIN BREIN AREINE NEARS WEED BUIL I ADD
10551 SATELLITE BLVD. 10551 SATELLITE BLVD. ORLANDO FL 32837 ORLANDO FL 32837					
				DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualifed
0.0:-:-10	(During and Control of the Control o	2a. Mailing Address			01/14/1998 4. FEI Number Applied For
					98-0057776 Not Applicable
26 Suite, Apt. #, etc. Suite, Apt. #, etc.					_ \$8.75 Additional
27					5. Certificate of Status Desired
City & State City & State					6. Election Campaign Financing \$5.00 May Be
23	28			. ,	Trust Fund Contribution Added to Fees
Zip	Country				8. This corporation owes the current year Intangible Personal Property Tax Personal Property Tax
24	[25]	<u> </u>	30		Personal Property Tax.
<u> </u>	9. Name and Address of Current	Registered Agent	81	Name	
MARK, BRIAN M ESQ.					
104 NORTH CHURCH STREET			82	Street	Address (P.O. Box Number is Not Acceptable)
KISSIMMEE FL 34741			83		
			0.4	City	■■ 85 Zip Code
			84	1	FL T
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 regist 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 registere 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 if madeable MOTE 5	Posistered Age	nt evanatura r	required when reinstating) DATE
12.	OFFICERS AND		13.	it aigristoro i	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	Р	☐ DELETE	1.1 TITLE		. (Z) ettange
NAME	WARD, WILLIAM S		12 NAME		On OR TIME CF
STREET ADDRESS	15 EAST BEAVER CREEK RD.,	RICHMOND HILL	1,3 STREE	TADDRESS	MARKHAM ONTARIO CAMADA L3R341
CITY-ST-ZIP	ONTARIO, CANADA L4B 1B3		1,4 CITY-S	T-ZIP	MARKITAM ONTHING CHAMING CORS
TITLE	VST	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	WARD, SUSAN M		2.2 NAME		221 BRATILLY ST
STREET ADDRESS	15 EAST BEAVER CREEK RD.,	RICHMOND HILL	· ·	TADORESS	MARKHAM, ONTARY CANADA LIRICI
CITY-ST-ZIP	ONTARIO, CANADA L4B 1B3	☐ DELETE	2, 4 CITY-5 3,1 TITLE	ST-ZIP	Change Addition
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NAME ethect andress				T ADDRESS	
STREET ADDRESS			3.4 CITY-S		
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NAME			4. 2 NAME		
STREET ADDRESS			4,3 STREE	TADDRESS	
CITY-ST-ZIP	<u></u>		4.4 CITY-S	T-ZIP	
TITLE		☐ OELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			52 NAME		
STREET ADDRESS				TADDRESS	
CITY-ST-ZIP		□ per ete	5.4 CITY-S 6.1 TITLE	ST-ZIP	Change Addition
TITLE		☐ DELETE	6.2 NAME		☐ Change ☐ Addition
NAME				T ADDRESS :	
STREET ADDRESS			6.4 CITY-S		
CITY-ST-ZIP			0.9 0111-0		<u></u>

14. I hereby certify that the information supplied with this filing does not guelify 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 truth 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 his 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 agreess, with all other like empowered.

SIGNATURE: