FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS G21793 DOCUMENT # (6) Corporation Name WATER WHIZ, INC. Principal Place of Business Mailing Address 11700 N.W. 101 ROAD 11700 N.W. 101 ROAD MEDLEY FL 33178 MEDLEY FL 33178 3. Date Incorporated or Qualified 3a. Date of Last Report 02/07/1983 01/19/1995 2. Principal Place of Business 2a. Mailing Address FEI Nurriber Applied For 59-2254178 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 Country Country 8. This corporation has liability for intangible tax under s. 199.032 Yes No Honda Statutes 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent В1 KURLAND, BERTRAM 82 Street Address (P.O. Box Number is Not Accep 11700 N.W. 101 ROAD 11700 N.W. 101 ЯR MEDLEY FL 33178 Zip Code 33178 84 City 85 6.02 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office orida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am action 607.0505, Florida Statutes. Pursuant to the provisions of Sections or registered agent, or both, in the Sections familiar with, and accept the obliga IRWIN GULTZMAN-PRESIDENT SIGNATURE RS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13 DELETE. DP 1 1 Trill TZMAN, IRWIN KURLAND, BERTRAM 1.2 NAME 11700 N.W. 101 ROAD 700 N.W. TOT ROAD STREET ADDRESS 1.3 STREET ADDRESS CHY-S1-ZIP MEDLEY FL 1.4 C-TY - S1 - ZiP DELETE Addition STD 2 1 TITLE Change ROSENFELD, ROBERT KURLAND, MILDRED 22 NAME MEDLEY, FL. 11700 N.W. 101 ROAD STREET ADDRESS 2.3 STREET ADDRESS MEDLEY FL CITY: ST-ZIP 2.4 D(TY-ST-Z)P ncitibbA 🔲 Change 3 1 THILE ٧D GOLTZMAN, IRWIN 3.2 NAME STREET ADDRESS 11700 N.W. 101 ROAD 3.3 STREET ADDRESS MEDLEY FL CITY-SI-ZIF 3.4 CHTY+ST ZIP ☐ DELETE 4 1 THE Change Addition 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4 4 CHTY - \$1 - ZIP [] DELETE [] Change ☐ Addition 5 1 THILE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CHTY ST-ZIP 5.4 CiTY - S1 - ZIF DELETE 6 1 TITLE ☐ Change Addition 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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SIGNATURE:

appears in Block 12 or Block 13 if

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12.

TITLE

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING

hanged, or on an attachment v

14. I do hereby certify that the information supplied with this filing is voluntaric certify that the information indicated on this annual report or supplement oath; that I am an officer or director of the corporation or the receiver of

IRWIN GOLTZMANT 3/96

furnisher and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I furtner report is true and accurate and that my signature shall have the same legal effect as if made under empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

(12/95)

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