

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H25799

FILED  
Jan 11, 2007  
Secretary of State

Entity Name: FLORIDA WATER TREATMENT, INC.

## Current Principal Place of Business:

1398 MAIN STREET  
DUNEDIN, FL 34698

## New Principal Place of Business:

## Current Mailing Address:

1398 MAIN STREET  
DUNEDIN, FL 34698

## New Mailing Address:

FEI Number: 59-2460487

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BLOOM, HERBERT P.  
249 DOGWOOD TRACE  
TARPON SPRINGS, FL 34688 US

## Name and Address of New Registered Agent:

ZARRA, MATTHEW F  
2134 MOUNTAIN ASH WAY  
NEW PORT RICHEY, FL 34655 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MATTHEW ZARRA

01/11/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BLOOM, HERBERT P.,  
Address: 249 DOGWOOD TRACE  
City-St-Zip: TARPON SPRINGS, FL 34688

Title: VP ( ) Delete  
Name: ZARRA, MATT  
Address: 2134 MOUNTAIN ASH WAY  
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: VP ( ) Delete  
Name: ZARRA, JORI  
Address: 2134 MOUNTAIN ASH WAY  
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: S ( ) Delete  
Name: BLOOM, MARK ESQ  
Address: 490 NE 101 ST  
City-St-Zip: MIAMI SHORES, FL 33138

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition  
Name: BLOOM, HERBERT P.,  
Address: 249 DOGWOOD TRACE  
City-St-Zip: TARPON SPRINGS, FL 34688

Title: PD (X) Change ( ) Addition  
Name: ZARRA, MATTHEW F  
Address: 2134 MOUNTAIN ASH WAY  
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: BLOOM, MARK ESQ  
Address: 4611 SWISS AVE  
City-St-Zip: DALLAS, TX 75204

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MATTHEW ZARRA

PD

01/11/2007

Electronic Signature of Signing Officer or Director

Date