


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 08:00 AM
Secretary of State

DOCUMENT # H40602 1. Entity Name BETTER BEVERAGE WATER SERVICE OF SOUTH FLORIDA, INC.	
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Principal Place of Business 6003-B NW 31 AVENUE FT. LAUDERDALE, FL 33309 US	Mailing Address 6003-B NW 31 AVENUE FT. LAUDERDALE, FL 33309 US
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DO NOT WRITE IN THIS SPACE



01102004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2488394	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**BOWMAN, WILLIAM
200 S BISCAYNE BLVD
SUITE 4900
MIAMI, FL 33131**

DO NOT WRITE
IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE: _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	1100000120105 04/19/04-80121-016 150.00...
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD SCHEMMEL, LINDA 5090 NW 41ST COURT LAUDERDALE LAKES, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V SATTER, KENT N. 7663 NORTHEE WAY LK WORTH, FL 33467
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BOWMAN, WILLIAM H. 11019 101 AVE N SEMINOLE, FL 33772
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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IN THIS SPACE

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **LINDA C. SCHEMMEL** **4-15-04**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR