

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Montanem
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 17 PM 12:27

DOCUMENT # J00342 (2)

1. Corporation Name

AQUA/AGRI ENERGY CORPORATION

Principal Place of Business

513 US HWY ONE
201-202
NORTH PALM BEACH FL 33408
US

Mailing Address

625 RIVERSIDE RD
NORTH PALM BEACH FL 33408-3726
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

02/21/1986

3a. Date of Last Report

04/20/1994

4. FEI Number

59-2660046

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes

☒ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

23. City & State

27. City & State

24. Zip

25. Country

29. Zip

30. Country

9. Name and Address of Current Registered Agent

ROTHSTEIN, ARNOLD J.
625 RIVERSIDE ROAD
NORTH PALM BEACH FL 33408

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

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 registered 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 registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of present holder of registered agent and this application

Signature of Registered Agent (signature required when not holding)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

PD

NAME

ROTHSTEIN, ARNOLD J.

STREET ADDRESS

625 RIVERSIDE ROAD

CITY, ST, ZIP

NORTH PALM BEACH FL

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.02(3)(g), Florida Statutes. I further certify that the information included 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. I am an officer or director of the corporation or the receiver or liquidator empowered to execute this report as required by Chapter 607, Florida Statutes, and that my entire approval is Block 12 or Block 13 if changed, or as an attachment with an address.

SIGNATURE:

Arnold J. Rothstein
ARNOLD J. ROTHSTEIN

9 JAN 95

407
B4B 4914