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PROFIT
CORPORATION
SANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J02381

IRRIGATION DESIGN SERVICE, INC.

FILED Jan 21, 1999 8:00am Secretary of State

01-21-1999 90045 020 ***150.00



Principal Place of Business Mailing Address 777 SW 6TH STREET 777 SW 6TH STREET FT. LAUDERDALE FL 33315 FT. LAUDERDALE FL 33315 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 02/28/1986 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 59-2683807 Not Applicable 21 Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees 28 Trust Fund Contribution 23 Country Zip Country Zio 8. This corporation owes the current year Intangible 30 Personal Property Tax. 24 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name SMITH, JUDITH Street Address (P.O. Box Number is Not Acceptable) 777 SW 6TH STREET FT. LAUDERDALE FL 33315 83 84 City 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, typed or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE 1.1 TITLE TITLE SMITH, GEORGE D., JR. 1.2 NAME NAME 777 SW 6TH ST. STREET ADDRESS 1.3 STREET ADDRESS FT LAUDERDALE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP ☐ DELETE Change ☐ Addition 2.1 TITLE TITLE SMITH, JUDITH L. 2.2 NAME NAME 777 SW 16TH ST 2.3 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE 3.1 TITLE ☐ Change Addition TITLE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE Change ☐ Addition 4.1 TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP ☐ DELETE ☐ Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE DELETE ☐ Change ☐ Addition TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. Thereby 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 annual report or supplemental annual report is the 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-6-99

954.763.7243 Daytime Phone #

CR2E034 (11/98)