FILE NOW: FILING FEE AFTER MAY 7 \$ \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

NC

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J09569

(1)

JET WASTEWATER SYSTEMS, INC.

FILED								
Feb	10	1997	8:00am					
Se	ecre	tary o	f State					

Principal Place	l Place of Business Mailing Address		- HOUTING ONLY MATTER CRIM BRIND WALL BLOND AND HOUR BLOND GLOND AND HOUSE						
127 INDUSTRIA	il RO	127 INDUSTRIAL RD							
SUITE E		SUITE E							
BIG PINE KEY	FL 33043	BIG PINE KEY FL 330434	3410						
US		US				 Date Incorporated or Qualified 04/16/1986 		ate of Last R 22/1996	eport
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number		Ap	plied For
21		26				59-2726491		No	ot Applicable
Suite, Apt	#. etc	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75	Additional
22		27				5. Certificate of otalia pessed		Fee Re	pariup
City & State	3	City & State				6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution		Added t	to Fees
Zip	Country	Zip		untry		8. This corporation has liability for			. 199.032,
24	25	29	30	,				_ No	
	g. Name and Address of Currer	nt Registered Agent		1		10. Name and Address of New Re	gistered /	Agent	
	OKS, W. THOMMES			81	Name				
	HAWK LANE			82	Street	Address (P.O. Box Number is Not Acceptate	le)		
BIG	PINE KEY FL 33043								
				63					
				84	City			es Zin (Code
				"	City		FL	85 Zip (Joue
11. Pursuant t	to the provisions of Sections 607.050	02 and 607 1508, Florida Statu	ites, the a	pove	-named	corporation submits this statement for the p	urpose of	changing it	s registered
office or n	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change was lations of, Section 607,0505. F	authorize Iorida Sta	id by itules	the corp	poration's board of directors. I hereby accept	ot the app	ointment as	registered
		,							İ
SIGNATURE	Signature, 1504 d or printed name of registered ag-	erc and the if applicable (NO	TE Registere	ed Age	nt signature	required when teinstaking)	DATE		
12.	OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE	ERS AND	DIRECTOR	IS IN 12
TITLE	PD	DELETE	1.1 T	ITLE				Change	Addition
NAME	THOMMES, BROOKS WILLIAM	Į.	1.2 N	IAME					
STREET ADDRESS	#5 HAWK LANE		1.3 9	TREET	ADDRESS				
CITY-ST-7-P	BIG PINE KEY FL		1.4 0	a-ytk	T-ZIP				ľ
TITLE	STD	DELETE	21 T					Change	Addition
NAME	THOMMES, SUSAN R.		221	IAME					ļ
STREET ADDRESS	#5 HAWK LANE		235	STREET	ADDRESS				
CITY-ST-2IP	BIG PINE KEY FL			GITY-S					
TITLE		DELETE	3.1 T					Change	Addition
NAME				IAME		·			
STHEET ADDRESS			1		ADDRESS				
CITY+ST 7IP				CITY-S					
THLE		DELETE		IITLE	at - Ell,			Change	Addition
NAME				NAME					
STREET ADORESS					ADDRESS				
CITY- ST-ZIF T/TLE		DELETE	5.11	ITY - S	1-711			Change	Addition
		EI DELLETE]		- CHANGE	Auditori
NAMF				IAME	100c-^-				
STREET ADDRESS					ADDRESS				
CITY - ST - ZIP		DEITTE		CITY-S	1-ZIP			Chana	Addition
THLE		☐ DELETE		ITLE				Change	FT Madilloy
NAME			•	VAME		1			,
STREET ADDRESS					ADORESS				
CITY-ST-ZIP			6.4 (CITY - S	T-ZIP				

14. I do hereby ceruly 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 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 12 or Block 13 if changed, or oney attachment with an address:

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

2/3/97

305 872 2033

C FILIDING #