## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

BOX 23628



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J94898

(0)

Mailing Address

BOX 23628

KOOL KLEAR WATER, INC.

| LILED              |  |  |  |  |  |  |  |  |
|--------------------|--|--|--|--|--|--|--|--|
| Apr 23 1998 8:00am |  |  |  |  |  |  |  |  |
| Secretary of State |  |  |  |  |  |  |  |  |

CH CD



| FT LAUDERDALE FL 33307 |  | FT LAUDERDALE FL 33307                 |                     |                     |                    | DO NOT WRITE IN THIS SPACE  |                             |                                |  |
|------------------------|--|--|---------------------|---------------------|--------------------|---|-----------------------------|--------------------------------|--|
|                        |  |  |                     |                     |                    | 3. Date Incorporated or Qualified 09/25/1987  |                             |                                |  |
| 2. Principal Pla       | ace of Business  | 2a. Mailing Address                    | 2a. Mailing Address |                     |                    | 4. FEI Number   | A                           | pplied For                     |  |
| 21                     | 26   |  |                     |                     | 65-0006830         | N   | lot Applicable              |                                |  |
| Suite, Apt. f          | f, etc.  |  | Suite. Apt. #, etc. |                     |                    |   |                             | Additional                     |  |
| 22                     |  | 27                                     | <del></del>         |                     |                    | 5. Certificate of Status Desired  |                             | lequired                       |  |
| City & State           |  | City & State                           |                     |                     |                    | 6. Election Campaign Financing  | \$5.00                      | ) May Be                       |  |
| 23                     |  | 28                                     |                     |                     |                    | Trust Fund Contribution   |                             | to Fees                        |  |
| Zip                    | Country  | Zφ                                     | Cou                 | Country             |                    | 8. This corporation owes or has paid the cu   |                             |                                |  |
| 24                     | 25   | 29                                     | 30                  | • /                 |                    |   |                             | □ No                           |  |
| <b>2</b> 4             | Name and Address of Currer   | <del></del>                            | 1301                |                     | <del></del>        | 10. Name and Address of New Registered  |                             |                                |  |
| POI                    |  |  |                     | 81                  | Name               |   |                             |                                |  |
|                        | ORSKI, PETER JAMES   |  |                     |                     | Hame               |   |                             |                                |  |
|                        | 1 NE 3RD TERR  |  |                     | 82                  | Street Add         | dress (P.O. Box Number is Not Acceptable)   |                             |                                |  |
| FT                     | AUDERDALE FL 33334   |  |                     |                     |                    |   |                             |                                |  |
|                        |  |  |                     | 83                  |                    |   |                             |                                |  |
|                        |  |  |                     | 84                  | City               | <del></del>   | OF Zin                      | Codo                           |  |
|                        |  |  |                     | 04                  | City               | Fi  | _ <b>85</b> Zip             | Code                           |  |
| office or re           | o the provisions of Sections 607,050<br>gistered agent, or both, in the State<br>n familiar with, and accept the oblig | e of Florida. Such change (            | was authorized      | d hv                | the cornora        | poration submits this statement for the purpose on<br>tion's board of directors. I hereby accept the ap | of changing<br>pointment as | its registered<br>s registered |  |
| . GIGHATOTIC .         | Signature, typed or perited name of registered ag  | cut and talo diapplicable              | (NO1£ . Registered  | d Age               | ni signature requi | uired when reinstating) DATE  |                             |                                |  |
| 12.                    | OFFICERS AN  | io directors                           | 13.                 |                     |                    | ADDITIONS/CHANGES TO OFFICERS AN  | D DIRECTO                   | RS IN 12                       |  |
| TITLE                  |  | ☐ D£LE¶                                | 1.1 10              | ĭL€                 |                    |   | Change                      | ☐ Addition                     |  |
| NAME                   | <b>POTORSKI, PETER J</b>   |  | 1.2 N/              | ME                  |                    |   |                             |                                |  |
| STREET ADDRESS         | 4661 NE 3RD TERR   |  | 1351                | REFT.               | ADDRESS            |   |                             |                                |  |
| CITY-ST-ZIP            | FT LAUDERDALE FL   |  |                     | 1.4 CITY - ST - ZIP |                    |   |                             |                                |  |
| TITLE                  |  | DELET                                  |                     |                     | 1-11               |   | Change                      | Addition                       |  |
| 1                      |  | La becch                               | 22 N/               |                     |                    |   |                             |                                |  |
| NAME                   |  | *                                      |                     |                     |                    |   |                             |                                |  |
| STREET ADDRESS         |  |  |                     |                     | ADDRESS            |   |                             |                                |  |
| CITY-ST-ZIP            |  |  | -                   | 2 4 CHY-ST-ZIP      |                    |   |                             | 1 4 4 199                      |  |
| TITLE                  |  | ☐ DELETI                               | 3.1 10              | 3.1 TITLE           |                    |   | L Change                    | Addition                       |  |
| NAME                   |  |  | 3.2 N/              | ME                  |                    |   |                             |                                |  |
| STREET ADDRESS         |  |  | 3.3 \$1             | REET.               | ADDRE\$\$          |   |                             |                                |  |
| CITY-ST-ZIP            |  |  | 3.4. C              | ITY - S             | ST-ZIP             |   |                             |                                |  |
| TITLE                  |  | DELETI                                 | 4.1 10              | TLE                 |                    |   | ☐ Change                    | Addition                       |  |
| NAME                   |  |  | 4.2 N               | AME                 |                    |   |                             |                                |  |
| STREET ADDRESS         |  |  | 43.51               | REET                | ADDRESS            |   |                             |                                |  |
| CITY-ST-ZIP            |  |  |                     | 1Y-S1               |                    |   |                             |                                |  |
| TITLE                  |  | DELETI                                 |                     |                     | - 211              |   | Change                      | ☐ Addition                     |  |
|                        |  |  | 5.2 N/              |                     |                    |   |                             |                                |  |
| NAME                   |  |  |                     |                     | 1000000            |   |                             | :                              |  |
| STREET ADDRESS         |  |  |                     |                     | ADDRESS            |   |                             |                                |  |
| CITY-ST-ZIP            |  | —————————————————————————————————————— | 5.4 CI              |                     | í - ZIP            |   | <del></del>                 |                                |  |
| TITLE                  |  | ☐ DELETI                               |                     |                     |                    |   | Change                      | Addition                       |  |
| NAME                   |  |  | 6.2 N/              | ME                  |                    |   |                             |                                |  |
| STREET ADDRESS         |  |  | 6.3 SI              | REET                | ADDRESS            |   |                             |                                |  |
| CITY-ST-ZIP            |  |  | 6.4 Ci              | 1Y-S1               | r-ZIP              |   |                             |                                |  |
| 14. I hereby c         | ertify that the information supplied v   | vith this filing does not qua          | lify for the exe    | empt                | tion stated in     | n Section 119.07(3)(i), Florida Statutes. I further o   | ertify that th              | e information                  |  |
| officer or o           |  | eiver or trustee empowere              |                     |                     |                    | ure shall have the same legal effect as if made u<br>quired by Chapter 607, Florida Statutes; and that  |                             |                                |  |