

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

FILED

Mar 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # K42025 (2)
1. Corporation Name
MAX WATERS ENTERPRISES, INC.

Principal Place of Business % MAX E. WATERS 1081 SALSONA AVE. KISSIMMEE FL 34744-6035	Mailing Address % MAX E. WATERS 1081 SALSONA AVE. KISSIMMEE FL 34744-6035
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 10/28/1988		4. FEI Number 59-2924283		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		8. \$8.75 Additional Fee Required		9. \$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent WATERS, MAX E. 1081 SALSONA AVE. KISSIMMEE FL 34744				10. Name and Address of New Registered Agent 81 Name DAVID M. WATERS 82 Street Address (P.O. Box Number is Not Acceptable) 2492 PINE CHASE CIR 83 84 City ST. CLOUD 85 Zip Code FL 34769			
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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 DAVID M. WATERS, President & Director DATE 3/2/98

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	DP	<input checked="" type="checkbox"/> DELETE		1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	WATERS, MAX E.			1.2 NAME			
STREET ADDRESS	1081 SALSONA AVE.			1.3 STREET ADDRESS			
CITY-ST-ZIP	KISSIMMEE FL			1.4 CITY-ST-ZIP			
TITLE	VP	<input type="checkbox"/> DELETE		2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	WATERS, DAVID M			2.2 NAME	PRESIDENT		
STREET ADDRESS	2492 PINE CHASE CIR			2.3 STREET ADDRESS	WATERS, DAVID M.		
CITY-ST-ZIP	ST CLOUD FL			2.4 CITY-ST-ZIP	2492 PINE CHASE CIR		
TITLE		<input type="checkbox"/> DELETE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				3.2 NAME	ST. CLOUD FL 34769		
STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-ZIP				3.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. 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 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 on an attachment with an address.

SIGNATURE: DAVID M. WATERS DATE: 2-18-98 407-957-8745

CR2E034 (10/97)