

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

FILED
Feb 10 1998 8:00 am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # K 47253

1. Corporation Name

WATER SOLUTIONS, INC.

Principal Place of Business

Mailing Address

2189 CLEVELAND ST. SUITE 224
CLEARWATER, FL. 33765

3. Date Incorporated or Qualified
1 Dec 1987

3a. Date of Last Report
1992

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc

26 Suite, Apt #, etc

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

4. FFI Number

59-2918-953

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WALTER C. SCHAFER
2431 ESTANCIA BLVD.
BLD. C
CLEARWATER, FL. 34621

81 Name

HARRY J. PETRY

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

591 RIVIERE RD.

83

PALM HARBOR

84 City

FL

85

Zip Code

34683

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

Harry J. Petry Pres./Sec.

Signature, type or printed name of registered agent and title if applicable.

(NOTE: Registered Agent Signature required when terminating)

1/29/98

DATE

12. OFFICERS AND DIRECTORS	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	PRESIDENT / SECRETARY <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	HARRY J. PETRY
13 STREET ADDRESS	591 RIVIERE RD.
14 CITY-ST-ZIP	PALM HARBOR, FL 34683
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

14. I do 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:

Harry J. Petry HARRY J. PETRY

Signature and typed or printed name of signing officer or director

1/29/98

Date

813-443-6211

Daytime Phone #

CR2E034 (9/96)



WATER SOLUTIONS, INC.
Manufacturers Representatives • Consultants

pg. 2 of 2
Commercial/Industrial
Water Conditioning Equipment
Ultra Pure Water Systems

SOFTENERS • FILTERS • DEIONIZERS • DEALKALIZERS • REVERSE OSMOSIS • ULTRAVIOLET • FIBERGLASS TANKS AND PIPE
2189 Cleveland Street • Suite 224-B • Clearwater, Florida 34625 • (813) 443-6211 • FAX (813) 461-6478

November 24, 1997

Secretary of State
Florida Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

RE: Corporate Status - Reinstatement
Document #K-47253 FEID # 592918953

Gentlemen:

I was alarmed to find out that our corporation was dissolved involuntarily several years ago! As far as I can determine, we were not notified. About the time that this occurred, we changed accounting firms and feel that this matter slipped through the crack during the transition.

I want to be reinstated before the first of January, 1998. However, we need to appeal to you to forego any penalty as this was not deliberate, or even known, until now, and any penalty would be a financial burden to us. We are only a three person company, manufacturers representatives, and value our name. Therefore this matter is of extreme importance to us.

Thank you. Please let us know as soon as possible about this matter.

Sincerely yours,

H. J. "Pete" Petry, Pres.
Manufacturers Representative

HJP/mab