2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF

FILED Mar 19, 2001 8:00 am Secretary of State **DOCUMENT # K76276** H2O ENVIRONMENTAL, INC. 03-19-2001 90450 037 ***150.00 Principal Place of Business Mailing Address 1061 WEST OAKLAND PARK BLVD. 1061 West Oakland Park BLVD. FT LAUDERDALE FL 33311 FT LAUDERDALE FL 33311 934064 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0111735 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent MILLER, MARK Street Address (P.O. Box Number is Not Acceptable) 1937 SE 15TH COURT FORT LAUDERDALE FL 33308 Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. CED, Treasurer, Director of Change **CEO** ☐ Delete TITLE TITLE MILLER, MARK NAME NAME STREET ADDRESS 1937 SE 15TH COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP POMPANO BEACH FL Delete TITI F HURST, CRAIG NAME NAME STREET ADDRESS 371 SE 14TH AVENUE STREET ADDRESS CITY-ST-ZIP POMPANO BEACH FL CITY-ST-ZIP Vice President ☐ Addition Delete TITLE TITLE __ GILDEMEISTER, KURT NAME NAME STREET ADDRESS STREET ADDRESS 5881 S MIAMI ROAD CITY-ST-ZIP CITY-ST-7IP VENICE FL ☐ Change ☐ Addition ☐ Delete TITLE WITOSHYNSKY, JOHN A NAME NAME 1023 POLK ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33019 ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CJTY-ST-ZIP ☐ Addition ☐ Delete TITLE Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP I hereby certify that the information supplied with this illing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.