

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

FILED
Mar 25 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 # **L15520** (4)
1. Corporation Name
PURE H2O BIO-TECHNOLOGIES, INC.

Principal Place of Business 3100 SOUTH CONGRESS AVENUE BOYNTON BEACH FL 33426	Mailing Address 3100 SOUTH CONGRESS AVENUE BOYNTON BEACH FL 33426
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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 09/11/1989	
4. FEI Number 65-0146714		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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No			

9. Name and Address of Current Registered Agent DOXEY, JOSEPH P. 3100 S. CONGRESS AVENUE BOYNTON BEACH FL 33426				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	☐ DELETE		1.1 TITLE		☐ Change ☐ Addition	
NAME	DOXEY, JOSEPH P			1.2 NAME			
STREET ADDRESS	3100 SOUTH CONGRESS AVENUE			1.3 STREET ADDRESS			
CITY-ST-ZIP	BOYNTON BEACH FL 33426			1.4 CITY-ST-ZIP			
TITLE	P	☐ DELETE		2.1 TITLE		☐ Change ☐ Addition	
NAME	MAZZIOTTI, LOUIS J.			2.2 NAME			
STREET ADDRESS	248 THREE ISLANDS BLVD. #307			2.3 STREET ADDRESS			
CITY-ST-ZIP	HALLANDALE FL 33009			2.4 CITY-ST-ZIP			
TITLE	D	☐ DELETE		3.1 TITLE		☐ Change ☐ Addition	
NAME	BAGITTINE, JOHN			3.2 NAME			
STREET ADDRESS	1440 VETERN MEMORIAL HWY			3.3 STREET ADDRESS			
CITY-ST-ZIP	HAUPPAGE NY 11788			3.4 CITY-ST-ZIP			
TITLE	D	☐ DELETE		4.1 TITLE		☐ Change ☐ Addition	
NAME	MAZZIOTTI, JOSEPH A.			4.2 NAME			
STREET ADDRESS	1019 ANCHORAGE WOOD CIRCEL			4.3 STREET ADDRESS			
CITY-ST-ZIP	LOUISVILLE KY 40223			4.4 CITY-ST-ZIP			
TITLE	PD	☐ DELETE		5.1 TITLE	V.P.	☐ Change ☒ Addition	
NAME				5.2 NAME	C. ERIC JONES		
STREET ADDRESS				5.3 STREET ADDRESS	1420 N. SWINTON AVE		
CITY-ST-ZIP				5.4 CITY-ST-ZIP	DELRAY BEACH FL. 33444		
TITLE		☐ DELETE		6.1 TITLE		☐ Change ☐ 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:

Joseph P. Doxey 3-12-98

CR2E034 (10/97)