

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 24, 2003 8:00 am
Secretary of State

01-24-2003 90063 029 ***150.00

DOCUMENT # L19840

1. Entity Name
UNIVERSAL WATER SYSTEMS, INC.



Principal Place of Business
**780 SOUTH CONGRESS AVENUE
WEST PALM BEACH FL 33406**

Mailing Address
**780 SOUTH CONGRESS AVENUE
WEST PALM BEACH FL 33406**

2. Principal Place of Business
6823 Bayshore Drive
Suite, Apt. #, etc.

3. Mailing Address
6823 Bayshore Drive
Suite, Apt. #, etc.

City & State
Lantana FL.

City & State
Lantana FL.

4. FEI Number
65-0151858

Applied For
☐ Not Applicable

Zip
33462 County
Palm Beach

Zip
33462 County
Palm Beach

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**MOORE, STEPHEN D.
780 S. CONGRESS AVENUE
WEST PALM BCH FL 33406**

7. Name and Address of New Registered Agent

Name **Stephen D. Moore**
Street Address (P.O. Box Number is Not Acceptable)
6823 Bayshore Drive
City **Lantana** FL Zip Code **33462**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Stephen D. Moore, Pres* *Stephen D. Moore* *17 JAN 03*
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST MOORE, STEVE 780 S. CONGRESS AVENUE WEST PALM BEACH FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MOORE, STEVE, JR. 780 S. CONGRESS AVENUE WEST-PALM BEACH FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	6823 Bayshore Drive Lantana, FL. 33462	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	6823 Bayshore Drive Lantana, FL. 33462	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Stephen D. Moore, Pres* *Stephen D. Moore* *17 JAN 03* *(561) 546-3531*
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (10/02)