2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2005
Secretary of State

DOCUMENT# P00000032701

Entity Name: WATER WIZARD USA, INC.

Current Principal Place of Business:

2303 W. MCNAB ROAD
POMPANO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 903
POMPANO BEACH, FL 33061

New Mailing Address:

FEI Number: 65-0995370 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SOTO, ALEX ESQ.
915 MIDDLE RIVER DRIVE
SUITE 304
FORT LAUDERDALE, FL 33304 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: ORTEGA, EDUARDO
Address: 2303 W. MCNAB ROAD
City-St-Zip: POMPANO BEACH, FL 33069

Title: VPD (X) Delete
Name: LONGO, ISABEL
Address: 2303 W. MCNAB ROAD
City-St-Zip: POMPANO BEACH, FL 33069

Title: TD ( ) Delete
Name: LONGO, JOHN
Address: 2303 W. MCNAB ROAD
City-St-Zip: POMPANO BEACH, FL 33069

Title: S ( ) Delete
Name: NORENA, LUZ S
Address: 2303 W. MCNAB ROAD
City-St-Zip: POMPANO BEACH, FL 33069

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUZ S. NORENA S 05/04/2005

Electronic Signature of Signing Officer or Director — Date