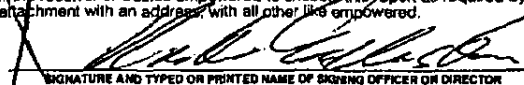
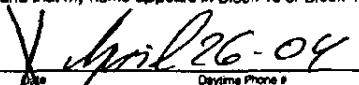


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 30, 2004 8:00 am
Secretary of State

6/15

06-15-2004 90002 013 ***150.00
07-30-2004 90006 015 ***400.00

DOCUMENT # P01000097537 1. Entity Name WATER-TECH AMERICA INC.			
Principal Place of Business 2800 E COMMERCIAL BLVD STE 208 FT LAUDERDALE, FL 33308		Mailing Address 2800 E COMMERCIAL BLVD STE 208 FT LAUDERDALE, FL 33308	
DO NOT WRITE IN THIS SPACE		44050836 	
		04062004 No Chg-P CR2E034 (10/03)	
		4. FEI Number 65-1147677	Applied For ☐ Not Applicable
		5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent KATZ, ALLEN H 2800 E COMMERCIAL BLVD STE 208 FT LAUDERDALE, FL 33308		DO NOT WRITE IN THIS SPACE	
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 _____ 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, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P EISENSTEIN, MARTIN 7154 N UNIVERSITY DR TAMARAC, FL 33321		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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: 			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		DATE Daytime Phone #	