

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000072435

Entity Name: BOTTLED WATER USA, INC.

FILED
Aug 28, 2008
Secretary of State

Current Principal Place of Business:

10250 S.W 56 STREET
SUITE C-201
MIAMI, FL 33165

New Principal Place of Business:

7992 SW 195 TERRACE
MIAMI, FL 33157

Current Mailing Address:

IMC-TGU DEPT 136
P.O. BOX 02-5320
MIAMI, FL 33102

New Mailing Address:

7992 SW 195 TERRACE
MIAMI, FL 33157

FEI Number: 80-0061358

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEREZ, ALDO I
10250 S.W 56 STREET
SUITE C-201
MIAMI, FL 33165 US

Name and Address of New Registered Agent:

EIROA, JUSTO M
7992 SW 195 TERRACE
MIAMI, FL 33157 US

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: JUSTO M EIROA

08/28/2008

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: EIROA, JUSTO M
Address: 318 N GAINES ST
City-St-Zip: OAK HILL, FL 32789

Title: SD () Delete
Name: EIROA, VIVIAN FLEFIL
Address: 318 N GAINES ST
City-St-Zip: OAK HILL, FL 32789

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: EIROA, JUSTO M
Address: 7992 SW 195 TERRACE
City-St-Zip: MIAMI, FL 33157

Title: SD (X) Change () Addition
Name: EIROA, VIVIAN FLEFIL
Address: 7992 SW 195 TERRACE
City-St-Zip: MIAMI, FL 33157

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JUSTO M EIROA

PD

08/28/2008

Electronic Signature of Signing Officer or Director

Date