2007 FOR PROFIT CORPORATION ANNUAL REPORT

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Sep 07, 2007 8:00 am
Secretary of State
09-07-2007 90001 018 ***150.00

40131635

04282007 Chg-P CR2E034 (12/06)

DOCUMENT # P06000131919

1. Entity Name
Mederos H2O Wizard Corporation

Principal Place of Business: 6721 Charkston Street, Hollywood, FL 33024
Mailing Address: Same

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number: 20-5863540 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
RODRIGUEZ, RAFAEL J 622 NORTH STATE ROAD 7 HOLLYWOOD, FL	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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: ____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered agent signature required when reinstating)

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director / P Enrique Mederos 6721 Charkston Street Hollywood, FL 33024 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director / T/S Mederos Cristina 6721 Charkston Street Hollywood, FL 33024. ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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] 09/04/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ATTACHMENT 40131635

RJR ACCOUNTING SERVICES

TEL 954 – 9628699 / FAX 954 – 962-8648

Taking Care of Busine

9/4/2007

Florida Dept of State
Division of Corporations
PO Box 8800
Tallahasse,Fl 32314

Reference
Annual Report 2007
Mederos H20 Wizard Corporation
Document # P06000131919

Enclosed you will find the 2007 Annual Report properly executed and a company check for the amount of $150. in order toi filed the Report

For your information the officers of the Corporation never received the Annual Report document in order to filed it

Please accept our request

Rfael J Rodriguez
Accountant

Medera H20 Wizard Corporation
— Enrique Mederos
President