

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 08, 1999 8:00 am
Secretary of State

04-08-1999 90034 026 ***150.00

DOCUMENT # P92000007026

1. Corporation Name
PRO-AGUA INC.

Principal Place of Business

16735 123RD TERR N
JUPITER FL 33478
US

Mailing Address

16735 123RD TERR.
JUPITER FL 33478

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/20/1992

4. FEI Number

65-0413069

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

9. Name and Address of Current Registered Agent

ALVAREZ, CARLOS A
16735 123RD TERR.
JUPITER FL 33478

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE
NAME ALVAREZ, CARLOS A
STREET ADDRESS 16735 123 TERRACE
CITY-ST-ZIP JUPITER FL 33478

TITLE VD ☐ DELETE
NAME FERRERAS, RAMONS P
STREET ADDRESS CANA DULCE NO 2 EL MILION
CITY-ST-ZIP SANTO DOMINGO DP

TITLE D ☐ DELETE
NAME ALVAREZ, PEDRO O
STREET ADDRESS 7400 W. 20TH AVE. #221
CITY-ST-ZIP MIAMI FL 33012

TITLE D ☐ DELETE
NAME GUERRA, FERNANDO
STREET ADDRESS 9220 SW 101ST AVE.
CITY-ST-ZIP MIAMI FL 33176

TITLE D ☐ DELETE
NAME PRIETO, LUIS E
STREET ADDRESS 7400 W. 20TH AVE. #2423
CITY-ST-ZIP MIAMI FL 33012

TITLE DS ☐ DELETE
NAME CUSICANQUI, JAVIER R
STREET ADDRESS 410 N. ROYAL POINCIANA BLVD. #A2
CITY-ST-ZIP MIAMI SPRINGS FL 33166

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 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 #

4/5/99

561 743 4330

CR2E034 (11/98)

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