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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## POCUMENT # P93000050420 (7)

GENESIS WATER SYSTEMS, INC.							
Principa: Place of Business Mailing Address  POB 13061 POB 13061 N PALM BEACH FL 33408 N PALM BEACH FL 33408-			08-7061				
					3. Date incorporated or Qualified 07/12/1993	3a. Date of Last 05/01/1996	
	ace of Business	2a. Mailing Address	······································		4. FEI Number	1	Applied For
21		26	<del></del>		65-0438155		lot Applicable
		Suite, Apt. #, etc.	, Apt. #, etc.		6. Certificate of Status Desired	1 +	Additional Regulred
City & State		City & State		6. Election Campaign Financing	· · · · · · · · · · · · · · · · · · ·	May Be	
23		28			Trust Fund Contribution		to Fees
Zip Country		Zrp Country		8. This corporation has liability for intangible tax under s. 199.032,			
24	25	29	30			Yes No	
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Reg	lstered Agent	
	IR, M. RICHARD		81	Name		•	
1845 PALM BCH LKS BLVD			82	Street Addr	ess (P.O. Box Number is Not Acceptable	e)	,,
	1200		83			·····	
<b>W</b> P	ALM BEACH FL 33401		0,	'}			
			84	City		FL 85 Zip	Code
11 Pursuant t	to the provisions of Sections 607 050	and 607 1509. Florida Statu	ites the above	e-pamed corp	poration submits this statement for the n	roose of changing	its registered
office ör n agent Tai SIGNATURE	egistered agent, or both, in the State m familiar with, and accept the obliga	of Ftorida. Such change was itions of, Section 607.0505, F	s authorized t Florida Statute	y the corporat es.	oration submits this statement for the prion's board of directors. I hereby accept	t the appointment a	s registered
	Signariae hyped or printed name of registered ager	nt and title if applicable (NC	OTE: Registered A	gent signatura requir	ed when reinstating)	DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC	The state of the s	
TITLE	D ODGO WHILLIAM E ID	☐ DELETE	1.1 TETLE	1		L. Change	Addition
NAME	CROSS, WILLIAM E JR POB 13061 NA		1.2 NAME	1			
STREET ADDRESS	N PALM BEACH FL 33408			TADDRESS			
CITY+ST-ZIP TITLE	T)	DELETE	1.4 CITY- 2.1 TITLE	ST-ZIP		Change	Addition
NAME	VELINSKY, MICHAEL	E precit	2.1 TITLE 2.2 NAME			Land Change	[ ] AUGHION
STHEET ADDRESS	POB 13061 NA			T ADDRESS	***	**	
CITY-ST-ZiP	N PALM BEACH FL 33408		2 4 DITY	1	•		
TITLE		DELETE	3.1 TITLE	-31-ZII		☐ Change	Addition
NAME		<del></del>	3.2 NAME				
STREEL AUDRESS				T AODRESS			
CITY - ST - ZIP			3.4. CITY	-ST-ZIP			
TITLE		DELETE	4.1 TITLE			Change	Addition Addition
NAME			4. 2 NAM	E			
STREET ADDRESS			4.3 STREE	T ADDRESS			
CHY-S!-ZIP			4.4 CITY-	ST-ZIP	······································		
TETLE		☐ DELETE	5.1 TIFLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			1	T ADDRESS			
CITY-S1-712		DELETE	5.4 CITY- 6.1 TITLE		······································	Change	☐ Addition
NAME.		□ pririt	6.2 NAME			L., Gridilige	ווטוויטעה 🗀
STREET ADDRESS				T ADDRESS			
City-St-ZiP			6.4 CITY	ţ			
14. I do heret	by certify that the information and le	With this filing does not aua	life for the av	amatica states	in Section 119.07(3)(i), Florida Statutes	. I further certify the	at the
Informatio	n indicated on this annual reports of Nicer or director of the cornor last on Nicer 12 or Block 13 if changed in	<b>Ka</b> olemental annual redort is	Weled to exe	curate and that cute this repor	my signature shall have the same legal nas required by Chapter 607, Florida, S	l effect as if made u tatutes; and that my	nder oath; that name

SIGNATURE:

HE CALIFIED

**FILED** 

May 14 1997 8:00am

Secretary of State

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