FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

	1996 MENT # P 94	400009332 (5)	CORPORATIONS		
HYDRO-FLOW, INC. Etrincipal Place of Business Mailing Address 3400 GULFSHORE BLVD C/O ROSALIND A. CARR 900 SIXTH AVENUE SOUTH. SUITE NAPLES FL 33940 US				3. Date incorporated or Qualified 3a. Date of Lest Report	
Dringing Di	ace of Business	Do Malling Address		01/27/1994 4. FEI Number	05/01/1995
z. Principai Pi	ace of Business	2a. Mailing Address		13-260 1884	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Gity & State		City & State		Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees
Ζφ 4]	Country 25	Zip 29	Country 30	8. This corporation has liability for in Florida Statutes Yes	₩No
	9. Name and Address o	f Current Registered Agent	81 Name	10. Name and Address of New Ro	egistered Agent
	ROSALIND A			ress (P.O. Box Number is Not Acceptable	ရ)
	900 SIXTH AVENUE SOUTH			1055 (10. Dox Haribor to Hor Hoopfab)	· · · · · · · · · · · · · · · · · · ·
SUITE 3	6 FL 33940		83		
HAP CEO	1 L 33540		84 City		FL 85 Zip Code
SIGNATURE	Stignatine typical or printed name of regi	derest agent and little if applicable (NO)	E: Registered Agent signature require		DATE:
12. Hu	ST	ERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12 Change Addition
NAM;	HUSING, MARIAN		1.2 NAME		
STREET ADDRESS	3400 GULFSHORE BL	.VD, NORTH	1.3 STREET ADDRESS		
CHY-SI-ZP THE	NAPLES FL 33940	DELETE	1.4 CITY - ST - ZIF		F3.06 F3.44
NAME	HUSING, HOYT	[] Detere	2.1 TITLE 2.2 NAME		Change Addition
STREET ADDRESS	3400 GULFSHORE BL	.VD, NORTH	2.3 STREET ADDRESS		
OHY-S1-ZIP	NAPLES FL 33940		2 4 CITY - ST - ZIP		
IIILE		☐ DELETE	3 1 TITLE		Change Addition
NAME			3.2 NAME		
STRE: LADDRESS			3 3 STREET ADDRESS		
DIY ST ZEL Dile		DELETE	3 4 C(TY - ST - Z(P 4. 1 T(TLE		Change Addition
MME			4.2 NAME		Cloudings Clyoquan
STREET ADDRESS			4.3 STREET ADDRESS		
DITY-ST Z-P			4.4 CITY - ST - ZIP		
TILE		☐ D£LE⊺Ł	5 1 TITLE		Change Addition
MAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
OTY ST ZP	·	Em pereze	5 4 CITY - ST - ZIP		
I ILF		☐ DELETE	6 1 TITLE		Change Addition
NAME Region Name (1980)			6.2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
(-[Y-S]-72 14 - Edo bereb	I	supplied with this filing is voluntarily force	6.4 CiTY-ST-ZiP	for the exemption stated in Section 119 (17/3Vk) 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.

SIGNATURE:

SIGNATURE AND TYPED OR