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Mailing Address

8634 VISTA POINT COVE

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

appears in Block 12 or Blog

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8634 VISTA POINT COVE



FLORIDA DEPARTMENT OF STATE

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Jan 17 1997 8:00am

Secretary of State

407 351-8980

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Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400037057 (4)

ADVANCED WATER SYSTEMS INC.

ORLANDO FL 32836 ORLANDO FL 32836-6306 3. Date Incorporated or Qualified 3a. Date of Last Report 05/13/1994 01/26/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-3243938 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, 24 Yes No 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent VASIL, GERARD J JR. 8634 VISTA POINT COVE **B2** Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32836 83 84 City 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. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE. Sees after Type discretice charge of received arient and tric if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)TOLE DELETE 1.1 TITLE Change Addition VASIL, JR. G J NAME 1.2 NAME 8634 VISTA POINT COVE STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL CHTY-SI-7P 1.4 CITY - ST - ZIP THLE DELETE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-7-P 2. 4 CITY - S1 - ZIP DELETE 3.1 TITLE Change Addition NAME 32 NAME STREET ADORESS 3.3 STREET ADDRESS City-St-7P 3.4. CITY - \$1 - ZIP DELETE TITLE Change 4.1 TITLE Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIF 4.4 CITY-ST-ZIP DELETE TOTALE 51 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE 1-TLE 61 TITLE Change ☐ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIF 6.4 CITY-ST-ZIP 14. I do 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 mustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

KARD J. VASIL JR.