SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 • DIVISION OF CORPORATIONS DOCUMENT # P94000058327 (5) U.S. WATER & SEWER, INC. Principal Place of Business Mailing Address 750 E. SAMPLE ROAD P.O. BOX 50588 BLDG. 5 BAY 2 LIGHTHOUSE POINT FL 33074-0588 POMPANO BEACH FL 33064 3. Date Incorporated or Qualified 3a. Date of Last Report 08/05/1994 10/18/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 3205 Canal Applied For 26 65-0511604 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State
Pempians Beach, FL City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation has liability for intangible tax under s 199 032, 33062 USA 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name OULTON, BRYAN P 750 E. SMAPLE ROAD Street Address (P.O. Box Number is Not Acceptable) BLDG. 5 BAY 2 POMPANO BEACH FL 33064 63 84 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 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 Signature, typed or printed name of registered agent and tire if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/2)TITLE DELETE 1.1711LE Change Addition NAME OULTON, BRYAN P 1.2 NAME CR2E034 STREET ADORESS 750 E. SAMPLE RD., BLDG. 5 BAY 2 13 STREET ADDRESS POMPANO BEACH FL 33064 CITY-S1-ZIP 1.4 CITY - ST - ZrP TITLE DELETE 2 1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2 3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY - ST - ZIP TIFLE DELETE 3 1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CHTY-ST-ZIP 34 CITY-ST-ZIP TITLE DELFTE 4 1 TrillE Change Addition 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-S1-ZIP 4 4 CITY - ST - ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5 2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5 4 CITY - ST - ZIP TITLE DELETE 6 1 TILLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 64 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes I further certify that the information indicated on this angual 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 office of infector of infector of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes and that my name appears in Block 12 or Block 13 it changes of on any attachment with an address.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

6/6/96

SIGNATURE: