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

DOCUMENT # P9400083955 (2)

HOT WATER, INC.

Principal	Place	of	Business
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FILED Apr 29 1997 8:00am Secretary of State



Principal Place of Business Mailing Address				1 105/108/ 110 18/11 018/1 05/11 08/11 08/11		11110 18101 81	1141 8111 1981			
624 DUVAL ST KEY WEST FL		624 DUVAL ST KEY WEST FL 33040-6555								
						3. Date Incorporated or Qualified 3a. Date of Last Report 11/17/1994 04/30/1996				
2. Principal P	face of Business	2a. Mailing Add	dress			4. FEI Number			Applied For	
21		26	···			65-0536255			Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. :	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State	е	City & State	>			6. Election Campaign Financing		\$5.0	0 May Be	
23		28	28			Trust Fund Contribution	Added to Fees			
Zip Country		Zip	Zip Co		/	8. This corporation has liability for i			s. 199.032,	
24	25	29	30				Yes [
	9, Name and Address of Curr	ent Registered Agent				10. Name and Address of New Re	gistered A	\gent		
	ITAL CONNECTION, INC.			81	Name					
417	E. VIRGINIA ST			82	Street Add	dress (P.O. Box Number is Not Acceptab	le)			
SUN	TE 1			L			-,			
TAL	LAHASSEE FL 32301			83						
				84	City			nr 7.	n Code	
				04	City		FL	85 Zij	p Code	
office or r	to the provisions of Sections 607.0 egistered agent, or both, in the Stamfamiliar with, and accept the obl	ite of Florida. Such cha	inge was autho	orized bi	v the corpora	poration submits this statement for the p ation's board of directors. I hereby accep	urpose of t the appo	changing sintment a	its registered as registered	
SIGNATURE		7.0 50 151 77 5								
12.	Signature, typed or printed name of registered a	AND DIRECTORS			ent signature requ	ADDITIONS/CHANGES TO OFFIC	DATE COO AND	DIDEOT	220 11 10	
TITLE	D OFFICENS A	A		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND	Change		
	FLEET II, RUSSELL W.							LJ Change	; Addition	
NAME				1.2 NAME						
STREET ADDRESS	624 DUVAL ST			1.3 STREET						
CITY-ST-ZIP	KEY WEST FL	····		1.4 CITY - 9	61 - 21P					
TITLE	D DELLER OLIVER OLIVER	[] (2 1 TITLE				L Change	e Addition	
NAME .	REAVES, SHIRLEY R			2.2 NAME						
STREET ADDRESS	624 DUVAL ST			23 STREET	ADDRESS					
CITY-ST-ZIP	KEY WEST FL 33040			2 4 CHY-	S1 - ZIP					
TITLE			SELE TE	3 1 THLE				L Change	Addition	
NAME				32 NAME						
STREET ADDRESS				3 & STREET	ADDRESS					
CITY-ST-ZIP				34. CITY-:	ST-7IP				···	
TITLE		<u> </u>	DELETE	4 1 1111.			_	Change	Addition	
NAME				4 2 NAME						
STREET ADDRESS				4 3 STREET	ADDRESS					
CITY-ST-ZIP	<u></u>		1	4.4 CHTY-5	ST- ZIP					
TITLE			DELETE	5 1 THLE				Change	e Addition	
'NAME				52 NAME						
STREET ADDRESS				5 9 STREET	ADDRESS					
CITY-ST-ZIP				5.4 CITY - S						
TITLE				6.1 TILLE				Change	e Addition	
NAME			i	6.2 NAME				5-		
STREET ADDRESS			ľ	G.3 \$1REE1	ADDRESS					
i										
CITY-ST-ZIP				6.4 CHY - S	01-711	·				

I do hereby certify that the information supplied with this filling 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes: and that my name appears in Block 13 if chapted, or on an altrophysiolity in a address.