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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Socretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT #

P95000003240 (5)

· · · · · · · · · · · · · · · · · · ·	EST WATER TECHNOLOG			
Principal Place of Business 3806 N. 29TH AVE. HOLLYWOOD FL 33020		Mailing Address 3806 N. 29TH AVE. HOLLYWOOD FL 33020		
				3. Date Incorporated or Qualified 3a. Date of Lifst Report 01/12/1995
2. Principal Pla	ice of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		65-053288 Not Applicable
Suite, Apt # 22	I, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
City & State		City & State	****	Fee Required
23		28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
	Country	Zip	Country	This corporation has fiability for intangible tax under s 199.032,
24	25	29	30	Florida Statutes 🔲 Yes 🕱 No
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Registered Agent
			81 Na	MOULLIAM K. MACKEY
	BRIAN R-		82 Str	root Address (P.O. Boy Number is Not Acceptable)
	1 . 29TH AVE:		B3	3806 N. 29 AVENUE
- HULLT	WOOD FL-93020		63	
			84 Cit	
11. Pursuant to	o the provisions of Sections 607,0502	2 and 607.1508. Florida Statu	ites the above name	of correlation authority this statement for the nurrouse of changing its registered office
Or registere	ed agent, or both, in the State of Flori	da. Such change was authori	ized by the composition	of corporation admits this statement for the purpose of changing its registered office of standard directors. I hereby accept the appointment as registered agent. I am
.	WILLIAM K.	ION 607.0005, FIORIZI STATULE MAALINEU	s. 1111L	1/18/01
SIGNATURE X	Signature, typica or principal name of registered agent	Land title if apprecable (N	IOTE: Flogistered Agent signa	ature required when reinstating) BATE
12.	OFFICERS AN	·	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TillE	- D	DELETE	1. 1 TITLE	Change Addition
NAME	FIFER, BRIAN R-	<i>,</i> ,	1.2 NAME	HOWARD E. GILLIAM
STREET ADDRESS	3806 N. 29TH AVE		1.3 STREET ADDRE	3806 N. 29 AVENUE
CHY-ST ZIF	- HOLLYWOOD FL 33020 D	DELETE	1 4 CITY-ST-ZIP	
NAME	SILVIA, WILLIAM F	[] ptttif	2 1 TITLE	V,T, D Change Addition
STREET ADDRESS	3806 N. 29TH AVE.		2 2 NAME 2 3 STREET ADDRE	WILLIAM K. MACKEY 3806 N. 29 AVENUE
CHY-S1-ZIF	HOLLYWOOD FL 33020		2 4 City - St - Zip	
THEF	11022111000 12 00020	DELETE	3 1 TITLE	S Change M Addition
NAML			3 2 NAME	
STREET ACRORESS			3.3 STREET ADOR	
CHIN SE ZIP			3.4 CITY - ST - ZIP	HOLYWOOD, FL 33020
TITLE		DELETE	4. 1 TITLE	Change Addition
NAME			4.2 NAME	
STEEL ADDRESS			4.3 STREET ADORE	ESS
CITY - ST - 7IP		□ DC+ ETT	4.4 CITY - ST - ZIP	
THEF		☐ DELETE	S 1 TITLE	Change Addition
NAME STREET ADDRESS			5 2 NAME	
CITY STUZINESS			5 3 STREET ADDRE	(28)
Vid. ≥ titi" Titl£	· · · · · · · · · · · · · · · · · · ·	DELETE	5 4 CITY - ST - ZIP 6 1 TITLE	Change Addition
NAME		C.J. T. T. T.	62 NAME	Country C Automoti
STREET ADDRESS			6.3 STREET ADDRE	FSS
C(1) Y + S 2 + 7(2)			6 4 CITY - ST - ZIP	
14. I do hereby	certify that the information supplied	with this filing is voluntarily fur	nished and does not	qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further
certify that t oath; that t appears in	the information indicated on this appli- am an officer or director of the corpo Block 12 or Block 13 if changed, or o	ual report or supplemental and pration or the receiver or trustr or an attachment with an add	nual report is true and ee empowered to exi dress.	d accurate and that my signature shall have the same legal effect as if made under ecute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE: X

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

/18/96 (305)925999