2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000046805

City-St-Zip:

ST PETERSBURG, FL

me: WATEROOLOR AIR SYSTEMS I

FILED Feb 27, 2004 Secretary of State

Entity Nai	me: WATER	COLOR AIR SYSTEMS, INC.			
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
	RIMOOR BV E, FL 33777	US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	IINGHALL CT GA 30082	US			
FEI Number	: 59-3323081	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Age				New Registered Agent:	
	DORIS RIMOORE BI E, FL 33777	LVD US			
	named entity e of Florida.	submits this statement for the p	urpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:				
	Electro	onic Signature of Registered Age	nt	Date	
Election Car	mpaign Financii	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DPT (KRAMER, JO` 116 KENNING SMYRNA, GA	HALL CT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DS (KRAMER, DO 8830 MERRIN SEMINOLE, F	OOR BLVD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	DV (MASTRY, RIC 2895 46TH AV		Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: JOY KRAMER DPT 02/27/2004