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 # P95000064688 (1)

AQUATICO, INC.

APPROVED AND FILED 97 AUG -5 AM 10: 20

SECRETARY OF STATE TALLAHASSEE, FLORIDA



Disclared Discos of Dustress								
Principal Place of Business Mailing Address					s sammane era failat atitis abint baint baint baint bint bints bridt bint laidt failt i sat			
	izie avenue ITY FL \$2401		221 MCKENZIE AVENUE PANAMA CITY FL 32401-3128					
						3. Date Incorporated or Qualified 08/22/1995	3a. Date of Last Report 10/22/1996	
·	1 Place of Business	2a. Mailing Add	dress			4, FEI Number	Applied For	
21 Suito A	pt. #, etc.	26 Suita Ant	y eta			59-3334130	Not Applica	
22 City & S		Suste, Apt. :				5. Certificate of Status Desired	\$8.75 Additional Fee Required	
23		City & State				Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	<u></u> ,	Country		8. This corporation has liability for		
24	25 9. Name and Address of Curre	29	30				Yes No	
		ent negistered Agent		81 N	lama	10. Name and Address of New Re	gistered Agent	
	IUTCHISON, EDWARD A				lame			
	21 MOKENZIE AVENUE			82 8	treet Add	ress (P.O. Box Number is Not Acceptab	le)	
P	ANAMA CITY FL 32401							
				84 (City		FL 85 Zip Code	
11. Pursua office o agent. SIGNATUR						poration submits this statement for the p lion's board of directors. I hereby accep and when reins aling)	urpose of changing its register It the appointment as registored DATE	
12.	OFFICERS A	ND DIRECTORS		3.		ADDITIONS/CHANGES TO OFFIC		
TITLE	D	1	DELETE 1.1	1 TITLE			Change Addit	
NAME	BARWICK, BILLIE J JR.		1.3	2 NAME				
STREET ADDRES	ss 85 HULL STREET		1.5	3 STREET ADE	DRESS			
CITY-ST-ZIP	BEVERLY MA 01915		1.4	4 CHTY - ST - Z	P		ve-ne teores	
TITLE			DELETE 21	1 TITLE			Addit	
NAME			2.7	2 NAME		*****33 *****33	0.80 ****165.00	
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CITY-ST-ZIP				4. CITY - ST - Z	IP .			
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CITY-ST-ZIP				4 CITY-ST-ZI				
TITLE				1 TITLE	'		Change Addit	
NAME		_		2 NAMF				
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CITY-ST-ZIP			1	4 CITY-ST-71		4/8		
TITLE				1 TITLE	1p	/ / /	☐ Change ☐ Addit	
NAME				2 NAME	9,	•	_ • • _ ·	
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CITY-ST-ZIP				4 CITY-ST-ZI				
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no ourselve 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if change, if the production of the corporation of the corpora

1/20/62