FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT #

P96000014068 (6)

WATER IMPROVEMENT TECHNOLOGIES BY BOB FREY, INC.

Principal Place	of Business	Mailing Address						
Principal Place of Business Mailing Address 1001 CAMPHOR LANE 1001 CAMPHOR LANE DELAND FL 32720 DELAND FL 32720-5078							******	1944 1944
					3. Date Incorporated or Qualified 02/12/1996	3a. Date of	Last Rep	port
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number		Арр	lied For
21		26	· · · · · · · · · · · · · · · · · · ·		59-3386779			Applicable
Suite, Apt. 1	·	Suite, Apt. #, etc.	···		5. Certificate of Status Desired	· ·	6.75 Ac Fee Req	quired
City & State		City & State			Election Campaign Financing Trust Fund Contribution		5.00 N Added to	
Zφ	Country	Zip	Countr	У	8. This corporation has liability for			199.032,
4	25		30			Yes No		
· · · · · · · · · · · · · · · · · · ·	9. Name and Address of Curre	nt Registered Agent		T 41	10. Name and Address of New Re	gistered Ager	<u> </u>	
SMA	LLEY, WAYNE		81	Name				
1001 CAMPHOR LANE				82 Street Address (P.O. Box Number is Not Acceptable)				
DEL	AND FL 32720		83	ļ				
			•	•				
			84	City		pm., 85	Zip C	ode
		00 J 007 4500 FL		<u></u>	rporation submits this statement for the	FL "	1	
SIGNATURE .	in familiar with, and accept the obliq Signature based at protect rame of registered at	gent and title if applicable (NOTE	Registered Ac		uired when reinslating)	DATE		
12.		NO DIRECTORS	13.	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFI			
TILLE	PD	DELETE	1.1 TITLE	ł		LI.	Change	Addition
NAME	FREY, BOB		1.2 NAME					
STREET ADDRESS	1001 CAMPHOR LANE		1.3 STREE	T ADDRESS				
CITY-SI-7IP	DELAND FL 32720	T priese	1.4 C/TY-	ST-ZIP		—	<u> </u>	1.1.000
TITLE		DELETE	2.1 TITLE			LJ 1	Change	Addition
NAME:			2.2 NAME	ì				
STREET ADDRESS				T ADDRESS				
COLY - ST - ZIP TOLE	,	DELETE	2. 4 City- 3.1 Title				Change	Addition
NAME		CLEETE C.	3.2 NAME	ì		٠.	highlyc	L.J Addition
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP			3.4, DITY	. 1				
TILLE		DELETE	4.1 TITLE	0. 2.			Chauda /	Addrig
NAME)		_	4. 2 NAM	£ 1.		_(28/	_ \v'
STREET ADDRESS			4	ET ADDRESS		'	(力	\sqrt{MN}
City St-7iP			4.4 CITY-		1		~//	⊃/ ~
TITLE		DELETE	5.1 TITLE				Change	Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREE	ET ADDRESS				
CITY-ST-ZIF			54 CITY-	ST-ZIP				
TITLE		DELETE	6.1 TITLE		المار القادر والمار والمار والمار والمار والمار والمار		Change	Addition
NAME			6.2 NAME	.	40000217 -05/13/97010	`ಎಡ <i>್</i>	t	•
STREET ADDRESS			6.3 STREE	ET ADDRÉSS	-U5/13/3fU1U	UD==U <i>5</i> ∠		
CITY - S1 - 7/P	4		6.4 C/TY-	ST-ZIP	***165.00			
information information I am an of appears in	y ceruly that the information suppli i indicated on this annual report or ficer or director of the corporation of i Black 12 or Black 13 if changed,	ed with this tiling ages not qualify supplement. The full report is troof the receiver of trustee empower or on an areal property with an add	y for the ex rue and acc ered to exe lress.	emption state curate and that cute this repo	ed in Section 119.07(3)(i), Florida Statute at my signature shall have the same leg ort as required by Chapter 607, Florida	es. I turner cer af effect as if m Statutes; and the	iiry (nat th ade undi nat my na	ne er oath; that ame

CIGNATURE

SHEMAU

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-27-97

904-736-1208

FILED

May 06 1997 8:00am

Secretary of State