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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000016770

1. Corporation Name

FILED Mar 05, 1999 8:00 am Secretary of State

03-05-1999 90071 043 ***150.00

Principal Place of Business 21 OSCAR HILL RD TARPON SPRINGS FL 34689 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 02/21/1996 2. Principal Place of Business 26 Suite, Apt. #, etc. 59-3358644 Suite, Apt. #, etc. 27 City & State Mailing Address 21 OSCAR HILL RD TARPON SPRINGS FL 34689 DO NOT WRITE IN THIS SPACE 4. FEI Number 59-3358644 Not Applied For Not Applicable 5. Certificate of Status Desired Fee Required Fee Required \$1. City & State \$2. City & State \$3. Date Incorporated or Qualifed 02/21/1996 4. FEI Number 59-3358644 Not Applicable 50. Certificate of Status Desired Fee Required Fee Required \$4. FEI Number 50. Certificate of Status Desired Fee Required Fee Required Fee Required \$4. FEI Number 50. Certificate of Status Desired Fee Required Fee Required Fee Required \$5.00 May Be	WATER 1	FOYS, INC.								
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9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Pursuant to the provisions of Sections 607/0502 and 607/1508. Florida Statules. The above-named corporation submits filts statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Statules. SIGNATIVE [Signature, typed or printer horner of registered agent of printer agent and accept the obligations of, Section 607/5005, Florida Statules. [Signature, typed or printer horner of registered agent, or both, in the State of Florida. Statules. [Signature, typed or printer horner of registered agent, or both, in the State of Florida. Statules. [Signature, typed or printer horner of registered agent, or both, in the State of Florida. Statules. [Signature, typed or printer horner of registered agent, or both, in the State of Florida. Statules. [Signature, typed or typed or both, in the State of Florida. Statules. [Si	23	Country		Countr						U F C C S
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name 12. Street Address (P.Q. Box Number is Not Acceptable) 12. Street Address (P.Q. Box Number is Not Acceptable) 13. Street Address (P.Q. Box Number is Not Acceptable) 14. Street Address (P.Q. Box Number is Not Acceptable) 15. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submitted his statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. 16. Street Address (P.Q. Box Number is Not Acceptable) 17. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submitted his statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. 18. Street Address (P.Q. Box Number is Not Acceptable) 19. Street Address (P.Q. Box Number is Not Acceptable) 19. Street Address (P.Q. Box Number is Not Acceptable) 10. Street Address (P.Q. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections 607.0506, Florida Statutes. 12. Street Address (P.Q. Box Number is Not Acceptable) 13. Street Address (P.Q. Box Number is Not Acceptable) 14. Street Address (P.Q. Box Number is Not Acceptable) 15. Street Address (P.Q. Box Number is Not Acceptable) 16. Street Address (P.Q. Box Number is Not Acceptable) 17. Street Address (P.Q. Box Number is Not Acceptable) 18. Street Address (P.Q. Box Number is Not Acceptable) 18. Street Address (P.Q. Box Number is Not Acceptable) 19. Street Address (P.Q. Box Number is Not Acceptable) 10. Street Address (P.Q. Box Number is Not Acceptable) 11. Street Address (P.Q. Box Number is Not Acceptable) 12. Street Address (P.Q. Box Number is Not Acceptable) 13. Street Address (P.Q. Box Number is Not Acceptable) 14. Street Address (P.Q. Box Number is Not Acceptable) 15. Street Address (P.Q. Box Numb	¬ ·	r	——————————————————————————————————————	_	y		•			□No
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TITLE	SIGNATURE	Signature, typed or printed name of registered ager	t and title if applicable. (NOTE: Re		ent sign	ature required w				770 111 40
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CITY-ST-ZIP 14. I hereby 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 竹介