


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

FILED
May 06 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # R96000029590 1. Corporation Name AQUA TECHNOLOGIES GROUP INC			
Principal Place of Business 5005 Sunshine State Parkway Feeder Rd Ft Pierce, FL 34951		Mailing Address	
2. Principal Place of Business same		2a. Mailing Address same	
21. State, Apt. #, etc. same		26. State, Apt. #, etc. same	
22. City & State same		27. City & State same	
23. Zip same		28. Zip same	
24. Country same		29. Country same	
9. Name and Address of Current Registered Agent Shyh-Min Tom Hsiao, ATG, Inc. 5005 Sunshine St Pkwy Feeder Rd. Ft Pierce, FL 34951		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.			
SIGNATURE (Type name, typed or printed name of the registered agent, and date if applicable) (NOTE: Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE President, Director <input type="checkbox"/> DELETE		1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
1.2 NAME Shyh-Min Tom Hsiao		1.2 NAME	
1.3 STREET ADDRESS 6103 Balsam Dr.		1.3 STREET ADDRESS	
1.4 CITY-STATE-ZIP Ft Pierce, FL 34982		1.4 CITY-STATE-ZIP	
2.1 TITLE Vice President, Director <input type="checkbox"/> DELETE		2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
2.2 NAME Nicholas David		2.2 NAME	
2.3 STREET ADDRESS 4954 Sparkling Pines Circle		2.3 STREET ADDRESS	
2.4 CITY-STATE-ZIP Ft Pierce, FL 34951		2.4 CITY-STATE-ZIP	
3.1 TITLE Secretary/Treasurer, Director <input type="checkbox"/> DELETE		3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
3.2 NAME Bruce G. Calman		3.2 NAME	
3.3 STREET ADDRESS 4141 16th St Bldg 6, Apt 8		3.3 STREET ADDRESS	
3.4 CITY-STATE-ZIP Vero Beach, FL 32960		3.4 CITY-STATE-ZIP	
4.1 TITLE Director <input type="checkbox"/> DELETE		4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
4.2 NAME Craig M Harris		4.2 NAME	
4.3 STREET ADDRESS 2106 Scenic Drive		4.3 STREET ADDRESS	
4.4 CITY-STATE-ZIP Brandon, Mississippi 37042		4.4 CITY-STATE-ZIP	
5.1 TITLE <input type="checkbox"/> DELETE		5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
5.2 NAME		5.2 NAME	
5.3 STREET ADDRESS		5.3 STREET ADDRESS	
5.4 CITY-STATE-ZIP		5.4 CITY-STATE-ZIP	
6.1 TITLE <input type="checkbox"/> DELETE		6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
6.2 NAME		6.2 NAME	
6.3 STREET ADDRESS		6.3 STREET ADDRESS	
6.4 CITY-STATE-ZIP		6.4 CITY-STATE-ZIP	
14. I, the undersigned, 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 contained 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.		900002170699 -05/08/97--01008--044 ***165.00	
SIGNATURE: Bruce G. Calman SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Bruce G. Calman		April 29, 1997 (564) 465-8977 Date Daytime Phone	

CR2E034 (9/96)