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

**PROFIT** CORPORATION ANNUAL REPORT

1997

JUST ADD WATER RENTALS, INC.



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000067537 (6)

## **FILED** Mar 05 1997 8:00am Secretary of State



Principal Piace 2650 WEST PE TALLAHASSEE	xddress St Pensacola Street. #11 SSEE FL 32304-2902									
							3. Date Incorporated or Qualified 08/14/1996	3a. D.	ate of Last R	eport
2. Princ pal El	lace of Business	2a. Mailing	Address				4. FEI Number		AF	oplied For
21		26					59-339-3834		<del></del>	ot Applicable
Suite, Apt :	# <sub>1</sub> EUC.	27 Suite, A	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required			
City & State	)	City & S	City & State				6. Election Campaign Financing \$5.00 May Be			
23		28					Trust Fund Contribution Added to Fees			
Zip Country		Zφ	h 11 11 11 11 11 11 11 11 11 11 11 11 11		Country		8. This corporation has liability for intangible tax under s 199.032, Florida Statutes  No			
24	25     29   9. Name and Address of Current Registered Agent			30			10. Name and Address of New Registered Agent			
POF	RTER, BRANDON				<b>B1</b>	Name		<del>7</del>		
2650 WEST PENSACOLA STREET, #11			-	62	Street Addr	Address (P.O. Box Number is Not Acceptable)				
TAL	LAHASSEE FL 32304				B3					
				ľ	0.3					
					84	City		FL	<b>85</b> Zip	Code
agent Lai SIGNATURE	m familiar with, and accept the of	bligations of, Section	607.0505, F	lorida Statu T£ Registered	ites	3. 	ion's board of directors. I hereby acce ad when reinstaling)	DATE		
12.		AND DIRECTORS	Foreste	13.		·····	ADDITIONS/CHANGES TO OFFI	ERS ANI		
TILE	PSTD PORTER, BRANDON		DELETE	1.1 TiT					Change	Addition
NAME STREET ADDR: SN	2850 WEST PENSACOLA	STREET #11		1,2 NAI		ADDRESS				1
CHY SI-ZIP	TALLAHASSEE FL 32304	D,114221, W 11		1.4 CIT						
THLE			DELETE	2.1 117		<u> </u>			☐ Change	Addition
NAME:				2.2 NA	WE		an.			
STREET 400FcMs				2.3 ST6	IE.ET	ADDRESS	•	€ j\$		
COY SEZIP			DELETE	2. 4 Cf 3.1 TH		ST - ZIP			☐ Change	Addition
TOLE NAME			L_ Detect	3.2 NA					Change	L Audillori
STREET ADDRESS						ADDRESS				
C(17 - S1 - 74)				3 4. CF	Y-\$	ST - ZIP				
1016			DELETE	4 1 TH	LE		•		Change	Addition
NAME				4. 2 NA						
STREET ADDRESS						AODRESS				
CHY SI ZIP TITLE			DELETE	4.4 CH 5.1 TH		T-ZIP		.,,	Change	Addition
NAME			hand www.th	5.2 NA		<b>6</b> :				
STELLI ACORESS						ADDRESS				
COTY ST ZIP				5.4 CIT						
TITHE			DELETE	6.1 TI)	ιE				Change	Addition
NAME				6.2 NA			1			
STEEL LADORESS				6.3 ST	REET	ADDRESS				

14. Ho 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.