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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600081436 (3)

AQUA DEVICES, INC.

FILED May 05 1997 8:00am Secretary of State



	ice of Business	Mailing Address							
226 BEVERL DELRAY BEA		226 BEVERLY DRIVE DELRAY BEACH FL 33444-3936							_
						Date Incorporated or Qualified 09/30/1996	3a. Date	of Last R	eport
	Place of Business	2a. Mailing Address				4. FEI Number 65-0721973			plied For
Suite, Ap	t # ole	26 Suite, Apt. #, etc.				65 0781 170		\$8.75 /	t Applicabl
22	n. P, G (2)	27				5. Certificate of Status Desired		Fee Re	
City & St	ale	City & State	1445. U			6. Election Campaign Financing		\$5.00	May Be
23		28		-		Trust Fund Contribution		Added t	o Fees
Zip TT)	Country	Zip	Coun	itry		8. This corporation has liability for i	ntangible ta Yes 🏻		199.032,
4	25 g. Name and Address of Curr		30			Florida Statutes 10. Name and Address of New Re			
				B1	Name			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	ALLUMS, ANDREW L 26 BEVERLY DRIVE		-	B2	Street Addre	ss (P.O. Box Number is Not Acceptat	(0)		
	ELRAY BEACH FL 33444		[2	Street Addre	ss (F.O. Box Nomber is 1401 Acceptat			
O.	FIMI PENOLITE COTT			93					
			- h	84	City			85 Zip (Code
					•		FL		
SIGNATURE	Signature typed or printed name of registered a	agent and title if applicable. (NOTE			it signature require		DATE		
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC			
TITLE	PD	☐ DELETE	1.1 10%				L.	Change	Addition
AME	HALLUMS, ANDREW L		1.2 NAN	_	1000000				
street adoress Dity - St - Zip	226 BEVERLY DRIVE DELRAY BEACH FL 33444		1.4 CITY		ADDRESS 700				
MILE	NERWIT DEVOUTE 25444	Art Fre	1,4 611	1 - 15 (- E-11	·			
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	5 }	[_] DELETE	2.2 NAM	ME	ADDRESS] Change	Addition
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1. I do 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 a mual 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 corpovation 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 Plock 13 if changed, or on an aylachment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

AWOREN L. HALLUMS 4/

561-278-5711