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**PROFIT CORPORATION ANNUAL REPORT** 

1**9**98



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000024506 (2)

TECHNO-AQUA, INC.

## FILED May 05 1998 8:00am Secretary of State



Mailing Address Principal Place of Business 120 SOUTH ATLANTIC DRIVE EAST 120 SOUTH ATLANTIC DRIVE EAST **BOYNTON BEACH FL 33435 BOYNTON BEACH FL 33435** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/13/1997 2. Principal Place of Business 2a. Mailing Address Applied For FEI Number Not Applicable 21 26 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 25 30 Personal Property Tax due June 30. 24 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent FRANÇOIS, MARIE J 120 SOUTH ATLANTIC DRIVE EAST 82 Street Address (P.O. Box Number is Not Acceptable) **BOYNTON BEACH FL 33435** 83 Zip Code 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 (NOTE: Engistered Agent signature required when reinstating) Signature, typical or printed nacial of registered agent and title it apposable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. DILETE Change Addition TITLE 1.1 HTLE FRANCOIS, FENOL NAME 1.2 NAME 120 SOUTH ATLANTIC DRIVE EAST STREET ADDRESS 1.3 STHEET ADDRESS **BOYNTON BEACH FL 33435** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 1III F FRANCOIS, MARIE J 2.2 NAME 120 SOUTH ATLANTIC DRIVE EAST STREET ADDRESS 2.3 STREET ADDRESS **BOYNTON BEACH FL 33435** CITY-ST-ZIP 2 4 C(1Y-ST-Z)P DELETE 3.1 TITLE Change Addition TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CHTY: \$1-ZIP DELETE Change ☐ Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Addition TITLE 5.1 TITLE NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 14. I hereby certify that the information supplied with this filing d indicated on this annual report or suppliemental annual repo-officer or director of the concention of the receiver or trusted qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information curate and that my signature shall have the same legal effect as if made undor oath; that I am an execute his report as required by Chapter 607, Florida Statutes, and that my name appears in