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PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000043909 (5)

AQUATIC ROCKSCAPES INTERNATIONAL, INC.

Principal Place of Business Mailing Address 1078 SPERLING AVENUE 1078 SPERLING AVENUE NAPLES FL 34103 NAPLES FL 34103 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>05/14/1997</u> 2. Principal Place of Business 2a. Mailing Address Applied For 59-3494016 26 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country B. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

Yes 7, No
Name and Address of New Registered Agent Country 24 25 29 30 9. Name and Address of Current Registered Agent **B1** Name BECKETT, MICHAEL D 1078 SPERLING AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) Naples FL 34103 83 84 City 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) CR2E034 (10/97 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change DELETE Addition TITLE 1.1 TITLE RECKETT MICHAELD NAME 1.2 NAME 1078 SPERLING AVE STREET ADDRESS 1.3 STREET ADDRESS CITY-ST-ZIP 1.4 CITY - S1 - ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition MILE 3.1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition 4.1 TITLE TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-7IP 4.4 CITY - ST - ZIP DELETE Change ■ Addition 51 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 14. I hereby certify that the information supplied with this filter 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 minute epoc terms 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 recovery province of powered 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 attackpoint with unaddress.

WIKE

FILED May 06 1998 8:00am Secretary of State

