2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # **P97000089600** Sep 18, 2000 8:00 am Secretary of State 1. Entity Name PARADISE WATER JET, INC. 09-18-2000 90018 013 ***550.00 Principal Place of Business Mailing Address 31521 WARNER ROAD 31521 WARNER ROAD BIG PINE KEY FL 33043 BIG PINE KEY FL 33043 DULUGGGG 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0788087 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent GILROY, DANIEL B Street Address (P.O. Box Number is Not Acceptable) 31521 WARNER ROAD BIG PINE KEY FL 33043 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. DPT ☐ Addition ☐ Change TITLE TITLE ☐ Delete GILROY, DANIEL B NAME NAME STREET ADDRESS 31521 WARNER ROAD STREET ADDRESS CITY-ST-ZIP BIG PINE KEY FL 33043 CITY-ST-7(P ☐ Delete ☐ Change Addition TITLE GILROY, CYNTHIA J NAME 31521 WARNER ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE **BIG PINE KEY FL 33043** Change ☐ Defete NAME NAME " STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete TITI F Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered

NAME

STREET ADDRESS CITY-ST-7IP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR