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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000095279

1. Corporation Name

AQUABIO	o investment, inc.								
Principal Place of Business Mailing Address							JJ(11 1818) WIIIW	. 4) (6) 1 (6) (6) (7) (8) (8) (8) (8)	
7740 S.W. 141 MIAMI FL 3315		7740 S.W. 141 STREET MIAMI FL 33158		DO NOT WRITE IN THIS SPACE					
						Date Incorporated or Qualifed 11/06/1997			
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		Applied For		
21		26				65-0793274		Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc. 27 City & State 28				5. Certificate of Status Desired See Required 6. Election Campaign Financing Trust Fund Contribution See Added to Fees			
City & Stat	е								
Zip	Country 25	Zip	Coun	ntry		This corporation owes the current year Personal Property Tax.	🗀 Yes	□No	
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Register	ed Agent		
NEARING, MICHAEL G 7740 S.W. 141 STREET MIAMI FL 33158					lame Street Addr	ress (P.O. Box Number is Not Acceptable)			
			-	84 (City		EL 85	Zip Code	
office or r agent. I a	to the provisions of Sections 607.05 registered agent, or both, in the State im familiar with, and accept the oblig	02 and 607.1508, Florida Statute of Florida. Such change was au ations of, Section 607.0505, Flor	es, the ab uthorized rida Statu	ove-n by the ites.	amed corp corporation	poration submits this statement for the purpose on's board of directors. I hereby accept the ap	e of changin	g its registered as registered	
SIGNATURE	Signature, typed or printed name of registered ag-	ent and title if applicable (NOTE:	Registered A	Agent siç	nature require	d when reinstating) DATE			
12.	OFFICERS A	AND DIRECTORS 13		13.		ADDITIONS/CHANGES TO OFFICERS			
TITLE	D	☐ DELETE	1.1 TITL	LE		•	☐ Cha	ange	
NAME	NEARING, MICHAEL G	1.2		1.2 NAME			•		
STREET ADDRESS 7740 S.W. 141 STREET			1.3 STR	REETAD	DRESS				
CITY-ST-ZIP	MIAMI FL 33158		1.4 CIT	Y-ST-ZI	P				
TITLE	D DELETE 2:		2.1 TITL	2.1 TITLE			☐ Cha	ange 🔲 Addition	
NAME	NEARING GRACIELA I		2.2 NAM	ME					

6.4 CITY-ST-ZIP CITY-ST-ZIP 14. I hereby certify that the information supplied with his filling 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, with all other like empowered.

2.3 STREET ADDRESS

3.3 STREET ADDRESS

3.4. CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6 3 STREET ADDRESS

5.4 CITY-ST-ZIP

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

4.1 TITLE

4. 2 NAME 4.3 STREET ADDRESS

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

☐ DELETE

☐ DELETE

☐ DELETE

DELETE

SIGNATURE:

7740 SW 141 ST

MIAMI FL 33158

7740 SW 141 ST

MIAMI FL 33158

NEARING, JACQUELINE A

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

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CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE NAME

TITLE

NAME

TITLE

NAME

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

14.758 99

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