2007 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Apr 25, 2007 08:00 AM **DOCUMENT # P98000014315 Secretary of State** 1. Entity Name B & B WATER SYSTEMS, INC. Principal Place of Business Mailing Address 950 LEATHER FERN LANE 950 LEATHER FERN LANE MIMS, FL 32754 MIMS, FL 32754 No Chg-P CR2E034 (11/05) 01082007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3493354 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ELLER, ROBERT DO NOT WRITE 950 LEATHER FERN LANE MIMS. FL 32754 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME ELLER, ROBERT STREET ADDRESS 950 LEATHER FERN LANE U00000729868 05/08/07-80057-014 150.00 CITY-ST-ZIP MIMS, FL 32754 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS CITY-ST-ZIP