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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # POROCOA1413

1. Corporation DUR-O-N	MATIC WATER HEATING SYSTEMS INC.				
Principal Place	of Business Mailing Address			SIEB! IIDI(B!BS! IIOEB	(III I DI II
7 000 N.W. 02N	D AVENUE 7933 N.W. 32ND AVENUE		1		
LUANILLEL GOLAS	AllAMI EL 20147		<u>.</u>		
7205 A	M 684 STREET 7205 NW	68th STREE		SPACE	
BAY # 1	4 Hirms FL 33166 BAYEN14	MIAMI FL	3. Date Incorporated or Qualifed		1
		33166	05/07/1998		
	ace of Business 2a. Mailing Address	م ماده	4. FEI Number 65-0835305	Applied	
21 720		8+457REGT	67-0035303	Not Apı	
Suite, Apt.			5. Certificate of Status Desired	\$8.75 Additi	
22 Km #					
City & Stat			6. Election Campaign Financing	\$5.00 May	
23 MIA		FLORISA	Trust Fund Contribution	Added to Fe	es
Zip	66 25 USA 29 53166 3	Country	8. This corporation owes the current year Int	tangible ∐Yes ∐N	io
24 331		021	Personal Property Tax. 10. Name and Address of New Registered		-
	9. Name and Address of Current Registered Agent	81 Name	to. Name and Address of New Registered	- Hour	$\neg \neg$
PFR:	SAD, JAINARINE				
	B N.W. 32ND AVENUE	82 Street Addr	ress (P.O. Box Number is Not Acceptable)]
	MI FL 33147	83			
1716-13	W 1 5 00 117	03			
		84 City	FL	85 Zip Code	
				a	etagad
11. Pursuant	to the provisions of Sections 607.0502 and 607.1508, Florida Statutes egistered agent, or both, in the State of Florida. Such change was auth in familiar with, and accept the obligations of Section 607.0505, Florid	, the above-named corp norized by the corporation	oration submits this statement for the purpose of on's board of directors. I hereby accept the appoi	ntment as registe	red
agent. I a	m familiar with, and accept the obligations of, Section 607.0505, Florid	a Statutes:	<u></u>		
SIGNATURE	horr o		d when reinstating) DATE		<u> </u>
12,	Signature, typed or printed name of registered agent and title if applicable. (NOTE: R OFFICERS AND DIRECTORS	egistered Agent signature require	ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTORS	N 12
TITLE	PD DELETE	1.1 TITLE	ABOTTO HOLORO TO STATE AND A		Addition
	-PERSÁD; JAINARINE (/)	1.2 NAME			1
NAME	7333 N.W. 32ND AVENUE				{
STREET ADDRESS	MIAMI FL 33147	1.3 STREET ADDRESS			
CITY-ST-ZIP		1.4 CITY-ST-ZIP		☐ Change ☐	Addition
TITLE	THE TOTAL PRINCE TOTAL	2.1 TITLE			,
NAME	JAY PERSAD	2.2 NAME			Ì
STREET ADDRESS	7705 N.W 68th STREET #14	2.3 STREET ADORESS		_	
CITY-ST-ZIP	MIAMI FL 33166	2.4 CITY-ST-ZIP 3.1 TITLE	· · · · ·	☐ Change 【V	Addition
TITLE -	VP - VICE PRESIDENT DELETE			change [,uuiii
NAME	VITAY KUMAR VILLARSETTY	3.2 NAME			İ
STREET ADDRESS	1730 M 72 14 Br #3	3.3 STREET ADDRESS			
CITY-ST-ZIP	HIALGAH FLORIDA 33010-1849.	3.4. CITY-ST-ZIP		Chacas C	7 Addition
TITLE	☐ DELETE	4.1 TITLE	•	Change [Addition
NAME		4, 2 NAME	•		
STREET ADDRESS		4.3 STREET ADDRESS			
CITY-ST-ZIP		4.4 CITY-ST-ZIP			7.4.400-0
TITLE	☐ DELETE	5.1 TITLE		☐ Change ☐	Addition [
NAME		5.2 NAME	•		
STREET ADDRESS		5.3 STREET ADDRESS			1
CITY-ST-ZIP		5.4 CITY-ST-ZIP			
TITLE	☐ DELETE	6.1 TITLE		Change [Addition

14. 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 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 requiremental 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 appear of the corporation of the report of the corporation of the corporation of the report of the corporation of the report of the corporation of the corporation of the report of the report of the corporation of the report of the

6.4 CITY-ST-ZIP

6.2 NAME

SIGNATURE:

NAME STREET ADDRESS

CITY-ST-ZIP