FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS FILED Apr 27, 1999 8:00 am Secretary of State 04-27-1999 90077 050 ***150.00

1999

DOCUMENT # P98000047674 CRYSTAL RIVER WATER, INC.

Principal Place of Business

Mailing Address

15018 S.W. 140TH COURT

15018 S.W. 140TH COURT

MIAMI FL 33186		MIAMI FL 33186		DO NOT WRITE IN THIS SPACE	
				 Date Incorporated or Qualifed 05/20/1998 	
2 Principal Pl	ace of Business	2a. Mailing Address			Applied For
21 13727	S.W. 152 St	26 13727 S.W 15	52 S T	4. FEI Number 65-0839307	Not Applicable
Suite, Art.	. 77.1	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Acditional Fee Required
City & State		City & State	FI	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24 33111	Coun.ry	Zip 33177 30	Miam: DAD	8. This corporation owes the current year Personal Property Tax.	Intangible ☐ Yes [☐ N o
	9. Name and Address of Current			10. Name and Address of New Register	ed Agent
0.440467 1005 0			81 Name		
SANCHEZ, JOSÉ R			82 Street Ad	dress (P.O. Box Number is Not Acceptable)	1 A C C T
332 S.W. 80TH AVENUE MIAMI FL 33144			94	22 5W 177h S	TREET
MINN	MI FL 33 144		83		
	Pr.	c.			85 Zip Code / 33/65
office crre	to the provisions of Sections 6074.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	' Florida. Such change was auth	orized by the corpor	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap	e of changing its registered prointment as registered
SIGNATUFE '		1 ,	R. SAN.	chez 6 4/2	4/99
SIGNATURE	Signature, typed or printed name of registered agent	and the if applicable (NOT : Re	gistered Agent signature req	ired when reinstating) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	SANCHEZ, MAGDA L		1.2 NAME		
STREET ADDRESS	15018 S.W. 140TH COURT		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33186		1.4 CITY-ST-ZIP		Change Addition
TITLE		☐ DELETE	2.1 TITLE		
NAME			2.2 NAME		
STREET ADDRESS		!	2.3 STREET ADDRESS		ĺ
CITY-ST-ZIP		DELETE	2.4 CITY-ST-ZIP		Change Addition
TITLE		רו מברבוב	31 TITLE		onlings
NAME			3.2 NAME		
STREET ADOR! SS			3.3 STREET ADDRESS		
CITY-ST-ZIP		□ DELETE	34. CITY-ST-ZIP 4.1 TITLE		Change Addition
TITLE		☐ OFFEIG	4.1 TILE 4.2 NAME		
NAME					ı.
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE			4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME			52 NAME		
STREET ADDR ESS			5 3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY- ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
STREET ADDRESS			6.4 CITY-ST-ZIP		

14. I here by 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 receiver of 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, ocon an attachment with an address, with all other like empowered.

SIGNATURE:

CR2E034 (11/98)