FILE NOW: FILING FEE AFTER MAY 1ST IS \$550,00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Xatherine Harris

Secretary of State

DIVISION OF CORPORATIONS

1999 P9800009016 **DOCUMENT #** 1. Corporation Name Custon Water Solutions, INC.

Principal Place of Business

Mailing Address

020 Ball Pand

FILED May 13, 1999 8:00 am Secretary of State

05-13-1999 90008 003 ***150.00

5 W	Dell Lowel Soll	C 1 1.						
SANAS	SAKASOTA FL 34240					DO NOT WRITE IN THIS SPACE		
3140412	30 (m · · · 3 (p ·					3. Date Incorporated or Qualifed Oct - 2 Z - 98		
Principal Place of Business 2a. Mailing Address				:		4. FEI Number	A	pplied For
21 0 0	6107 Glew Abbay LANC 26				· 	65-0871186	N	ot Applicable
Suite, Apt	Suite, Apt #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State City & State				,		6. Election Campaign Financing	\$5.00	Мау Ве
201						Trust Fund Contabution	Added	to Fees
$\begin{bmatrix} Zip \\ 24 \end{bmatrix}$ 34 202 $\begin{bmatrix} Country \\ 25 \end{bmatrix}$ MANATEE $\begin{bmatrix} Zip \\ 29 \end{bmatrix}$ 30				Country		8. This corporation owes the current year		THNO
9. Name and Address of Current Registered Agent						Personal Property Tax. 10. Name and Address of New Registe	Yes	ENO ,
Ronald Caus Presided. 81 Na					ame	To the state of th	ou rigent	
6107 Glen Abbey LANG Bradenton FL. 34202					treet Addre	ess (P.O. Box Number is Not Acceptable)		
Boodenton FL 34202				83				
101 1-90	200000		ļ					
				84 C	ity	1	=	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-nai						pration submits this statement for the purpose	e of changing its	registered
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and agreet the obligations of Section 607,0505, Florida Statutes.								
SIGNATURE	Raniel (on	Private						
. 3	Signature, typed or printed name of registered agent a			Agent sign	ature required	when reinstating) DATE		
TITLE	OFFICERS AND	DIRECTORS	1 13.		-	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	ORS IN 12
NAME	President/terrouman Ronald Care		4	1.2 NAME		_	Change	C. Vagition
STREET ADDRESS	6107 Glew Abboylan	e	4	1 13 STREET ADDRESS				
l i	Bradentan FL. 342		3	1.4 CITY-ST-ZIP				
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			3	REET ADDF	FSS			
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CITY-ST-ZIP	200		g 0.4 CITY	1-31-41				

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 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.

SIGNATURE:

CR2E034 (11/98)