2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000004009

1. Entity Name

H2O RENTALS, MM.28 LITTLE TORCH KEY

Principal Place of Business / Mailing Address

H2O Rental Services, Inc.

SANDBAR RESTAURANT

2. Principal Place of Business	3. Mailing Address
SANDBAR	4158 DORN RD.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: BIG TORCH KEY FLA.	City & State
Zip: 33042 Country: MONROE	Zip / Country

FILED
Jul 10, 2000 8:00 am
Secretary of State

07-10-2000 90012 043 ***150.00

00067563

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-0886757 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name: GILBERT GOSS

Street Address (P.O. Box Number is Not Acceptable): 4158 DORN RD

City: BIG TORCH KEY FL Zip Code 33042

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.

SIGNATURE: MARTIN L BISHOP [signature] 5-1-2000

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00 After MAY 1, 2000 Fee will be $550.00 Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	GILBERT GOSS 4158 DORN RD BIG TORCH KEY FLA 33042 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MARTIN L BISHOP 5420 DORN RD BIG TORCH KEY FLA 33042 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (9/99)

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARTIN L BISHOP [signature] 5-1-2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #