


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 07, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # P99000071579**  
 1. Entity Name  
**AGUAPURA USA CORPORATION**



Principal Place of Business  
**4140 NW SECOND COURT  
 BOCA RATON, FL 33431**

Mailing Address  
**4140 NW SECOND COURT  
 BOCA RATON, FL 33431**

**DO NOT WRITE IN THIS SPACE**



02282005 No Chg-P CR2E034 (10/03)

4. FEI Number  
**65-0979360** Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
**GONZALEZ, EDUARDO E  
 4140 NW SECOND COURT  
 BOCA RATON, FL 33431**

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

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GONZALEZ, EDUARDO E 4140 NW SECOND COURT BOCA RATON, FL 33431
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PONCE, JUAN E 821 SOROLLÀ CORAL GABLES, FL 33134
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GONZALEZ, RICARDO J 1171 SW 13TH PLACE BOCA RATON, FL 33486
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GONZALEZ, JOSE I 1950 SW 22ND AVE MIAMI, FL 33175
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 03/07/05-80080-008 150.00

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ed Gonzalez **EDUARDO E. GONZALEZ** MARCH 2, 2005 561-338-8738  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #