
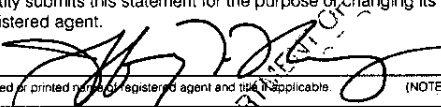
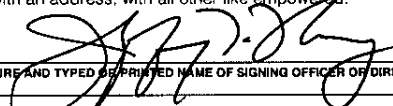


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 08, 2004 8:00 am**  
**Secretary of State**

03-08-2004 90046 005 \*\*\*150.00

<b>DOCUMENT # S25220</b> 1. Entity Name <b>WATER CONSULTANTS INTERNATIONAL, INC.</b>					
Principal Place of Business <b>601 EL DORADO PKWY PLANTATION, FL 33317</b>			Mailing Address <b>601 EL DORADO PKWY PLANTATION, FL 33317</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		02092004    Chg-P    CR2E034 (10/03)	
Zip		Country		4. FEI Number <b>65-0239445</b>	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>HORNBURG, CHARLES D. 601 EL DORADO PARKWAY FT LAUDERDALE, FL 33317</b>				Name <b>HORNBURG, JEFFREY T.</b> Street Address (P.O. Box Number is Not Acceptable) <b>601 EL DORADO PARKWAY</b>  City <b>PLANTATION</b> <b>FL</b> Zip Code <b>33317</b>	
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:  <b>JEFFREY T. HORNBURG</b> 3/4/04 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HORNBURG, CHARLES D.		NAME	HORNBURG, MARILYN	
STREET ADDRESS	601 EL DORADO PARKWAY		STREET ADDRESS	601 EL DORADO PARKWAY	
CITY-ST-ZIP	FT LAUDERDALE, FL		CITY-ST-ZIP	PLANTATION, FL 33317	
TITLE	D	<input type="checkbox"/> Delete	TITLE		
NAME	TOWER, JOHN		NAME		
STREET ADDRESS	10201 N. CONCORD DRIVE		STREET ADDRESS		
CITY-ST-ZIP	MEQUON, WI 53097		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		
NAME	HORNBURG, JEFFREY T.		NAME		
STREET ADDRESS	601 EL DORADO PARKWAY		STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE, FL		CITY-ST-ZIP		
TITLE			TITLE		
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE			TITLE		
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE			TITLE		
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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:  <b>JEFFREY T. HORNBURG</b> 3/4/04 954 792-7204 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #</small>					