

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

FILED
Jan 20 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V05285

(4)

1. Corporation Name

ALL FLORIDA WATER, INC.



Principal Place of Business

2329 N W 30 PLACE
POMPANO BCH FL 33069
US

Mailing Address

3032 N.W. 25 AVENUE
POMPANO BEACH FL 33069
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/09/1992

4. FEI Number

65-0307168

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 2329 N.W. 30 PLACE

Suite, Apt. #, etc.

City & State

23 POMPANO BEACH FL

Zip

24 33069

Country

25 US

2a. Mailing Address

26 2329 N.W. 30 PLACE

Suite, Apt. #, etc.

City & State

28 POMPANO BEACH, FL

Zip

29 33069

Country

30 US

9. Name and Address of Current Registered Agent

JAMES M. PAINTER P.A.
1300 N FEDERAL HWY
SUITE 110
BOCA RATON FL 33432-2848

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose 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 accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VPD ☐ DELETE

NAME PRENTICE, DAVID M.

STREET ADDRESS 1545 SW 13 ST

CITY-ST-ZIP BOCA RATON FL

TITLE PD ☐ DELETE

NAME PRENTICE, SUSAN C.

STREET ADDRESS 1545 SW 13 ST

CITY-ST-ZIP BOCA RATON FL

TITLE V ☐ DELETE

NAME PRENTICE, DAVID CLAY

STREET ADDRESS 1545 SW 13 ST

CITY-ST-ZIP BOCA RATON FL

TITLE AV ☐ DELETE

NAME PRENTICE, JASON CLARK

STREET ADDRESS 1545 SW 13 ST

CITY-ST-ZIP BOCA RATON FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 employed or 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.

SIGNATURE:

[Signature]

1/9/98 954-974-2125

CR2E034 (10/97)