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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # V15012 1. Corporation Name

HYDRO-SWEEP CORPORATION

Principal Place of Business	Mailing Address
33 N.W. 2ND STREET DEERFIELD BEACH FL 33441 US	DEERFIELD BEACH FL 33443

## **FILED** Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90122 041 \*\*\*150.00



DEERFIELD BEACH Ft. 33441 US		DEERFIELD BEACH FL 33443			DO NOT WRITE IN THIS SPACE		
US					3. Date Incorporated or Qualifed		
					02/19/1992		
2. Principal Pl	ace of Business	2a. Mailing Address	_		4. FEI Number Applied For		
21		PO Box 1195	,		65-0321193 Not Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired   \$8.75 Additional		
22		27			5. Certificate of Status Desired Fee Required		
City & State	e	City & State			6. Election Campaign Financing \$5.00 May Be		
23		28			Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Country		This corporation owes the current year Intangible		
24	25	29 30	<u>L</u>		Personal Property Tax. Yes No		
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registered Agent		
			81	Name			
	GIERS, THOMAS A.		82	82 Street Address (P.O. Box Number is Not Acceptable)			
201 N FEDERAL HWY							
DEEF	RFIELD BEACH FL 33441		83				
			84	City	85 Zip Code		
				'	<b>                                      </b>		
office or re	to the provisions of Sections 607.050, egistered agent, or both, in the State on m familiar with, and accept the obligat	of Florida. Such change was autho	orized by	the corpor	corporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered		
SIGNATURE	Signature, typed or printed name of registered agen	it and title if applicable. (NOTE: Reç	gistered Agen	it signature rec	quired when reinstating) DATE		
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition		
NAME	LUSK, THOMAS	•	1.2 NAME	1			
STREET ADDRESS	201 N. FEDERAL HIGHWAY		1,3 STREET	ADDRESS			
CITY-ST-ZIP	DEERFIELD BCH FL 33441		1,4 CITY-S	T-ZIP	,		
TILE	V	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition		
NAME	BOUDET, MARC	1	2.2 NAME	}			
STREET ADDRESS	201 N. FEDERAL HIGHWAY		2.3 STREET	ADDRESS			
CITY-ST-ZIP	DEERFIELD BCH FL 33441		2. 4 CITY-S	T-ZIP			
TITLE	OLDINICLO DOTTI E VOTTI	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition		
NAME		į	3.2 NAME				
STREET ADDRESS		,	3.3 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CITY-S	T-ZIP	•		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition		
NAME		•	4. 2 NAME	1			
STREET ADDRESS		,	4.3 STREET	ADDRESS			
CITY-ST-ZIP			4,4 CITY-S				
TITLE		☐ DELETE	5.1 TITLE		Change Addition		
NAME		_	5.2 NAME	-			
STREET ADDRESS		•	5.3 STREET	ADDRESS			
CITY-ST-ZIP		]	5.4 CITY-S	r-zip			
TITLE		☐ DELETE	6.1 TITLE	-+	☐ Change ☐ Addition		
NAME		<u></u>	6.2 NAME				
			6.3 STREET	ADDRESS			
STREET ADDRESS			64 CITY-S				

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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-08-99 Date

954-426-1500