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DIVISION OF CORPORATIONS
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CORPORATION ANNUAL REPORT
1995

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

DOCUMENT # **V71175** **(6)**

1. Corporation Name
HYDRAQUIP INTERNATIONAL CORPORATION

Principal Place of Business	Mailing Address
7641 S.W. 148TH TERRACE MIAMI FL 33158	7641 S.W. 148TH TERRACE MIAMI FL 33158

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/15/1992	3a. Date of Last Report: 05/01/1994
4. FEI Number: 65-0363096	☐ 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 has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
21	26 PO Box 272516
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28 TAMPA, FL.
Zip 24 / County 25	Zip 29 33688 / County 30 Hillsborough

9. Name and Address of Current Registered Agent

ALDANA, CARLOS
7641 S.W. 148TH TERRACE
MIAMI FL 33158

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 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] CARLOS ALDANA 6/1/95
Signature, type or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE	D	☒ Change ☐ Addition
NAME	ALDANA, CARLOS	12 NAME	ALDANA CARLOS	
STREET ADDRESS	7641 S.W. 148TH TERRACE	13 STREET ADDRESS	PO BOX 272516	
CITY-ST-ZIP	MIAMI FL	14 CITY-ST-ZIP	TAMPA, FL 33688	
TITLE	D	21 TITLE	D	☒ Change ☐ Addition
NAME	ALDANA, CARLOS EDUARDO	22 NAME	ALDANA, CARLOS EDUARDO	
STREET ADDRESS	7641 S.W. 148TH TERRACE	23 STREET ADDRESS	PO Box 272516	
CITY-ST-ZIP	MIAMI FL	24 CITY-ST-ZIP	TAMPA, FL 33688	
TITLE		31 TITLE		☐ Change ☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY-ST-ZIP		34 CITY-ST-ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: [signature] CARLOS ALDANA 6/1/95 305-784 2867
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0206853 CF