

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H64707

1. Entity Name

OCEAN MAGIC SURF N SPORT, INC.

FILED

Feb 06, 2001 8:00 am
Secretary of State

02-06-2001 90306 013 ***150.00

Principal Place of Business
103 S. U.S. #1. SUITE C-6
JUPITER FL 33477

Mailing Address
103 S. U.S. #1. SUITE C-6
JUPITER FL 33477



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number **59-2545901**

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
FRENCH, DONALD R.
103 S U S #1, C6
JUPITER FL 33477

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

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.

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	P	TITLE	
NAME	FRENCH, DONALD R.	NAME	
STREET ADDRESS	64 COLONY RD	STREET ADDRESS	
CITY-ST-ZIP	JUPITER FL 33469	CITY-ST-ZIP	
☐ Delete		☐ Change ☐ Addition	
TITLE	V	TITLE	
NAME	FRENCH, SUSAN B.	NAME	
STREET ADDRESS	1807 - 18TH COURT	STREET ADDRESS	
CITY-ST-ZIP	JUPITER FL	CITY-ST-ZIP	
☐ Delete		☐ Change ☐ Addition	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
☐ Delete		☐ Change ☐ Addition	
TITLE		TITLE	
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STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
☐ Delete		☐ Change ☐ Addition	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
☐ Delete		☐ Change ☐ Addition	

13. 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, the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **DONALD R FRENCH**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-26-01 561-744-8925
Date Daytime Phone #

CR2E034 (10/00)