

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

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PROFIT CORPORATION ANNUAL REPORT 1998



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

FILED

98 AUG 19 PM 2:34

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



DOCUMENT # 277009 (7)

1. Corporation Name
 SURFSIDE OF FLORIDA, INC.

Principal Place of Business

1731 N. MAIN ST.
 JACKSONVILLE FL 32206
 US

Mailing Address

1731 N. MAIN ST.
 JACKSONVILLE FL 32206
 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/31/1963

4. FEI Number

59-1029727

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

2a. Mailing Address

21 Suite, Apt. #, etc.
 22 City & State
 23 Zip Country
 24

26 Suite, Apt. #, etc.
 27 City & State
 28 Zip Country
 29 30

9. Name and Address of Current Registered Agent

WACHS, ALAN S
 8375 DIX ELLIS TRAIL
 SUITE 401
 JACKSONVILLE FL 32256

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PTD	<input type="checkbox"/> DELETE
NAME	TAYLOR, FRAN	
STREET ADDRESS	1731 N. MAIN ST.	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	VSD	<input type="checkbox"/> DELETE
NAME	TAYLOR, STACY	
STREET ADDRESS	1731 N. MAIN ST.	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	600002621366-4
1.3 STREET ADDRESS	-08/20/98-01084-011
1.4 CITY-ST-ZIP	****150.00 ****150.00
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 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: [Handwritten Signature] 8/19/98

CR2E034 (5/98)

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FURNITURE - APPLIANCES

SURFSIDE OF FLORIDA, INC.

1731 N. MAIN STREET
JACKSONVILLE, FLORIDA 32206
(904) 385-5472

Aug. 4, 1998

Division of Corporations
Annual Reports Filings
P.O. Box 1500
Tallahassee, Fl. 32302-1500

Attn.: Ms. Trevor Brumbley

Dear Ms. Brumbley:

July 15, 1998, I spoke with you regarding the Corporation
Annual Report, 1998, Surfside of Florida, Inc.

The first report was filled out and mailed, together with our
check #6997, in the amount of \$150.00, however, I had received
a Corp. return from our C.P.A., which I thought was for Surfside
of Florida, Inc., so I tore up the one I had made and sent the
check with the one from our C.P.A.

Until I talked with you by phone, July 15th, and you advised
this report was for Stan, Corporation.

This is a new Corporation which I have not been accustomed to
sending, therefore, my error was not in checking the one he sent.

I sincerely appreciate you taking the time to discuss this matter
with me, therefore, we are sending this to your attention, together
with our check #7119, in the amount of \$150.00.

I have been sending these reports in for thirty-four years and
will continue to do so in the future.

Very truly yours

SURFSIDE OF FLORIDA, INC.


Fran Taylor
President

Per Sean Tower