

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

10/2

<b>PROFIT CORPORATION ANNUAL REPORT 1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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FILED

97 AUG 22 PM 2: 16

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

<b>DOCUMENT # 405096</b> 1. Corporation Name <b>SURF AND SAND MOTOR LODGE CORP.</b>
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Principal Place of Business	Mailing Address
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>07/18/72</b>		3a. Date of Last Report <b>05/01/96</b>	
21. <b>1688 Meridian Ave.</b> Suite, Apt. #, etc.		26. <b>1688 Meridian Ave.</b> Suite, Apt. #, etc.		4. FEI Number <b>59-1418572</b>		Applied For <input type="checkbox"/> Not Applicable	
22. <b>Suite 414</b> City & State		27. <b>Suite 414</b> City & State		5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
23. <b>Miami Beach, FL</b> Zip Country		28. <b>Miami Beach, FL</b> Zip Country		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
24. <b>33139</b>		29. <b>33139</b>		30.		8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
<b>Corporation Service Company 1201 Hays Street Tallahassee, Florida 32301</b>				81. Name			
				82. Street Address (P.O. Box Number is Not Acceptable)			
				83.			
				84. City			
				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 *Karen B. Rozar* **Karen B. Rozar, As Its Agent** DATE **8-22-97**

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE		<input type="checkbox"/> DELETE		1.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				1.2 NAME		<b>D, P, S, T</b>	
STREET ADDRESS				1.3 STREET ADDRESS		<b>Andre Godin</b>	
CITY-ST-ZIP				1.4 CITY-ST-ZIP		<b>1688 Meridian Ave. Suite 414</b>	
TITLE		<input type="checkbox"/> DELETE		2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				2.2 NAME			
STREET ADDRESS				2.3 STREET ADDRESS		<b>100002274871--8</b>	
CITY-ST-ZIP				2.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-ZIP				3.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. I do 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 *Andre Godin* **ANDRE GODIN** 08/21/97 (905) 273-3341



ACCOUNT NO. : 072100000032

REFERENCE : 505770 4303929

AUTHORIZATION :

*Patricia Pizuth*

COST LIMIT : \$ 550.00

ORDER DATE : August 22, 1997

ORDER TIME : 10:25 AM

ORDER NO. : 505770-005

CUSTOMER NO: 4303929

CUSTOMER: Ms. Jazmine Roman  
Greenberg Traurig Hoffman  
22nd Floor  
1221 Brickell Avenue  
Miami, FL 33131-3238

ANNUAL REPORT FILING

NAME: SURF AND SAND MOTOR LODGE CORP

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Andrew Cumper

EXAMINER'S INITIALS: \_\_\_\_\_

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