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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 618605

1. Corporation Name

(0)

((

FILED Feb 18 1997 8:00am Secretary of State

	ED SURFACES, INC.					
Principal Place of Business Mailing Address 2000 BANKS RD., STE. A-1 2000 BANKS RD., STE. A-1					F 100110 01101 31007 (0110 01111 01111 01111	21911 91611 91911 91911 91 911 91911 1981
MARGATE FL 33063 MARGATE FL 33063-7735						
					3. Date Incorporated or Qualified	3a. Date of Last Report
Principal P	lace of Business	2a. Mailing Address			04/24/1979 4. FEI Number	03/06/1996 Applied For
21	iace of business	26			59-1900536	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
22		27				Fee Required
City & State	e	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Coun	lry	8. This corporation has liability for i	
24	25	29	30		Florida Statutes	Yes No
	9, Name and Address of Currer	nt Registered Agent		Name	10. Name and Address of New Re	gistered Agent
	HARD A. SLATER			Name		
6924 NW 7TH COURT MARGATE FL 33063			ε	2 Street Add	dress (P.O. Box Number is Not Acceptab	le)
רוריותיי	MAIL IL 00000	•	ε	3		
			5	4 City		85 Zip Code
				1 '		
11. Pursuant office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State	12 and 607.1508, Florida Statute Lof Floridan Such change was a	es, the about outhorized	ove-named cor by the corpora	poration submits this statement for the pation's board of directors. Hereby accept	urpose of changing its registered If the appointment as registered
	m familiar with, and accept the oblig	Ations of Section 607 5505, Flo	rida Statu	eś.	Slater, vice Pres. 2	111/97
SIGNATURE	Signature, typad or printed name of registered age	enl and title if applicable (NOTI			cired when reinstating)	DATE
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	
TIFLE	PTD					Change Addition
NAME	BOND, JOHN W 2625 NE 28TH CT., #A		1.2 NAM		•	
STREET ADDRESS	LIGHTHOUSE POINT FL			ET ADDRESS		
CITY - ST - ZIP TITLE	VSD DELETE		2.1 NTL	- ST - ZIP		☐ Change ☐ Addition
NAME	OLATER BOLLER		2.2 NAM	E		
STREET ADDRESS	6924 N.W. 7TH COURT		2.3 STR	ET ADDRESS		
CITY - ST - ZIP	MARGATE FL		-	'- ST-ZIP		
THILE			3 1 1111	ļ		Change Addition
NAME STREET ADDRESS			3.2 NAM	E ADDRESS		
CITY-S1-ZIP				'-ST-ZIP		
TITLE) ABOUT A STATE OF THE STATE OF	☐ DELETE	4.1 TITL			Change Addition
NAME		•	4. 2 NAM	1E		
STREET ADDRESS			4.3 STRE	ET ADDRESS		
CITY-ST-ZIP		DELETE		-ST-ZIP		Change
TIFLE NAME		, Doereig	5.1 TITU 5.2 NAM	i		☐ Change ☐ Addition
STREET ADDRESS				ET ADDRESS		
CHTY - ST - ZIP				- ST-ZIP		
TITLE		DELETE	6.1 TITE			Change Addition
NAME			6.2 NAM	£		
STREET ADDRESS			6.3 STR	ET ADDRESS		
City-St-ZiP	are contifue that the information are also	d with this filing down not availe		-ST-ZIP	od in Contino 110 07(2)(i) Elovido Statuto	I fushed post for the title

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.