


FILE NOW: FILING FEE IS \$61.25

FILED
Feb 24, 1999 8:00 am
Secretary of State

02-24-1999 90203 019 ****61.25

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NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 814318					
1. Corporation Name DEERFIELD SURF CORPORATION					
Principal Place of Business 1960 N E 1ST ST DEERFIELD BEACH FL 33441			Mailing Address 1960 N E 1ST ST DEERFIELD BEACH FL 33441		



2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 03/30/1960 4. FEI Number 59-1087812 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
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9. Name and Address of Current Registered Agent CASPER, ERNEST 1960 N.E. 1ST STREET DEERFIELD BEACH FL 33441				10. Name and Address of New Registered Agent 81 Name Casper, Ernest, President 82 Street Address (P.O. Box Number is Not Acceptable) 1960 N.E. 1st Street 83 84 City Deerfield Beach, FL 85 Zip Code 33441			
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE		(NOTE: Registered Agent signature required when reinstating)		DATE							
12. OFFICERS AND DIRECTORS						13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
TITLE		V		<input type="checkbox"/> DELETE		1.1 TITLE		S/T		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME		ZAMBORY, ANDREW				1.2 NAME		Casper, Barbara			
STREET ADDRESS		1960 NE 1ST STREET				1.3 STREET ADDRESS		1960 N.E. 1st Street			
CITY-ST-ZIP		DEERFIELD BCH FL 33441				1.4 CITY-ST-ZIP		Deerfield Beach, FL 33441			
TITLE		D		<input type="checkbox"/> DELETE		2.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		WHEELER, CHARLES				2.2 NAME					
STREET ADDRESS		1960 NE 1ST STREET				2.3 STREET ADDRESS					
CITY-ST-ZIP		DEERFIELD BCH FL 33441				2.4 CITY-ST-ZIP					
TITLE		D		<input type="checkbox"/> DELETE		3.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		BOYER, KAY				3.2 NAME					
STREET ADDRESS		1960 NE 1ST ST				3.3 STREET ADDRESS					
CITY-ST-ZIP		DEERFIELD BCH FL 33441				3.4 CITY-ST-ZIP					
TITLE		D		<input type="checkbox"/> DELETE		4.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		OROSZ, BERTHA				4.2 NAME					
STREET ADDRESS		1960 NE 1ST ST				4.3 STREET ADDRESS					
CITY-ST-ZIP		DEERFIELD BCH FL 33411				4.4 CITY-ST-ZIP					
TITLE		D		<input type="checkbox"/> DELETE		5.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		KOMOROFF, SHIRLEY				5.2 NAME					
STREET ADDRESS		1960 NE 1ST STREET				5.3 STREET ADDRESS					
CITY-ST-ZIP		DEERFIELD BCH FL 33441				5.4 CITY-ST-ZIP					
TITLE		P		<input checked="" type="checkbox"/> DELETE		6.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		CASPER, ERNEST				6.2 NAME					
STREET ADDRESS		1960 NE 1ST ST				6.3 STREET ADDRESS					
CITY-ST-ZIP		DEERFIELD BCH FL 33441				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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ernest J. 1/19/99 954-480-8263
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (1/98)