# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**May 01, 2012**
**Secretary of State**

DOCUMENT# F20138

**Entity Name:** M.T.B. SURF SHOP, INC.

**Current Principal Place of Business:**

2334 N. A1A
INDIALANTIC, FL 32903

**New Principal Place of Business:**

**Current Mailing Address:**

2334 N. A1A
INDIALANTIC, FL 32903

**New Mailing Address:**

**FEI Number: 59-2072602** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

VELARDI, GAIL L
2334 N. A1A
INDIALANTIC, FL 32903 US

**Name and Address of New Registered Agent:**

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: _____
Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:**

Title: PRES
Name: MULHERN, DONALD C
Address: 285 CINNAMON DR
City-St-Zip: SATELLITE BCH., FL 32937

Title: DST
Name: VELARDI, GAIL L
Address: 522 BAY CIRCLE
City-St-Zip: INDIAN HARBOR BCH, FL 32937

Title: VP
Name: MULHERN, ERIC
Address: 10 EMERALD CT
City-St-Zip: SATELLITE BEACH, FL 32937

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: GAIL VELARDI SEC 05/01/2012
Electronic Signature of Signing Officer or Director Date