

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

FILED

**Mar 17 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F56912 (1)

1. Corporation Name
SURFSIDE GLASS COMPANY, INC.



Principal Place of Business RICHARD WOOD 2250 S OLD DIXIE HWY VERO BCH FL 32962	Mailing Address RICHARD WOOD 2250 S OLD DIXIE HWY VERO BCH FL 32962
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2224 5th Ct. S.E.	2a. Mailing Address 26 2224 5th Ct. S.E.
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State Vero Beach, FL.	28 City & State Vero Beach, FL.
24 Zip 32962	25 Country USA
29 Zip 32962	30 Country USA

3. Date Incorporated or Qualified 12/03/1981	
4. FEI Number 59-2144940	Applied For <input type="checkbox"/> Not Applicable
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
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**WOOD, RICHARD
2224 5TH COURT S.E.
VERO BEACH FL**

10. Name and Address of New Registered Agent

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	ST	<input type="checkbox"/> DELETE
NAME	WOOD, ANN	
STREET ADDRESS	2224 5TH CT S E	
CITY-ST-ZIP	VERO BCH FL	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	WOOD, RICHARD	
STREET ADDRESS	2224 5TH COURT S.E.	
CITY-ST-ZIP	VERO BEACH, FL 00000	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	MINICH, WENDY	
STREET ADDRESS	2234 5TH CT SE	
CITY-ST-ZIP	VERO BEACH FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
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.

CR2E034 (10/97)

SIGNATURE _____ DATE **3/10/98 (57) (56) 897**