

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 JUN 16 AM 9:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F59647

1. Corporation Name

ATLANTIC SURFING MATERIALS, INC.

Principal Place of Business

Mailing Address

C/O MITCHELL, BRUCE A.
1825 SOUTH RIVERVIEW DR.
MELBOURNE, FL 32901

C/O MITCHELL, BRUCE A.
1825 SOUTH RIVERVIEW DR
MELBOURNE, FL 32901

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12-28-81

3a. Date of Last Report
4-18-94

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

59-2159689

Applied For

Not Applicable

21

26

Suite, Apt. #, etc

Suite, Apt. #, etc

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

22

27

City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

23

28

Zip

Country

Zip

Country

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MITCHELL, BRUCE A.
1825 SOUTH RIVERVIEW DR.
MELBOURNE, FL 32901

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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

Signature typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

P/T/D

NAME

HOUSTON, ROSS

STREET ADDRESS

3063 RIO PALMA NORTH

CITY ST ZIP

INDIALANTIC, FL 32903

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY ST ZIP

800001517198
-06/20/95--01044--001
****225.00 ****225.00

☐ Change

☐ Addition

TITLE

V/S/D

NAME

HOUSTON, JEAN K.

STREET ADDRESS

3063 RIO PALMA NORTH

CITY ST ZIP

INDIALANTIC, FL 32903

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY ST ZIP

☐ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY ST ZIP

☐ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY ST ZIP

☐ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY ST ZIP

☐ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY ST ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 entered, or on an attachment with an address.

SIGNATURE:

Ross Houston Ross Houston
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

June 9, 1995
Date

Corporate Officer's