

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2003 8:00 am
Secretary of State

03-13-2003 90079 025 ***150.00

DOCUMENT # F59647

1. Entity Name
ATLANTIC SURFING MATERIALS, INC.



Principal Place of Business
**1825 RIVERVIEW DRIVE
MELBOURNE FL 32901
US**

Mailing Address
**1825 RIVERVIEW DRIVE
MELBOURNE FL 32901
US**

2. Principal Place of Business
300 EAST DR

3. Mailing Address
PO Box 1819

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
MELBOURNE, FL

City & State
MELBOURNE, FL

4. FEI Number **59-2159689**

Applied For

Not Applicable

Zip
32904

Country
US

Zip
32902-1819

Country
US

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**KOSTRO, VICTOR S
1825 S RIVERVIEW DRIVE
MELBOURNE FL 32901**

7. Name and Address of New Registered Agent

Name **ROSS HOUSTON, PRES.**

Street Address (P.O. Box Number is Not Acceptable)
300 EAST DRIVE

City **MELBOURNE**

FL

Zip Code
32904

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Ross Houston, Pres.**

ROSS HOUSTON, PRES

MAR 7, 2003

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **PTD** ☐ Delete
NAME **HOUSTON, ROSS**
STREET ADDRESS **3063 RIO PALMA N**
CITY-ST-ZIP **INDIALANTIC FL 32903**

TITLE **VSD** ☐ Delete
NAME **HOUSTON, JEAN K.**
STREET ADDRESS **3063 RIO PALMA N**
CITY-ST-ZIP **INDIALANTIC FL 32903**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

ROSS HOUSTON, PRES

MAR 7, 2003

(321) 676-4447

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)