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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT :

J90433

(0)

FILED May 01 1998 8:00am Secretary of State

SPECTR	UM SURF COMPANY, IN	C.						
Principal Place of	of Business	Mailing Address				-{	ON BABU BURU DI	IK DIBKI INDA
% CRAIG F. BOBBITT 130 FIFTH AVE INDIALANTIC FL 32903		% CRAIG F. BOBBITT 130 FIFTH AVE INDIALANTIC FL 32903		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified				
						08/28/1987		
2. Principal Plac	e of Business	2a. Mailing Address				4. FEI Number		plied For
21		26	26			59-2842319		t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75	
22		27			-,	5. Certificate of Status Desired	Fee Re	equired
City & State		City & State				6. Election Campaign Financing		May Be
23		28				Trust Fund Contribution		to Fees
Zip				untry		8. This corporation owes or has paid the cr		
24	25 29 29 Name and Address of Current Registered Agent		30	ı		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent		
		in negistarea Agent		81	Name	IO, Italio and Addicas of Itali Itagistoria	rigoni	
	BITT, CRAIG F.							
130 PIFTH AVE INDIALANTIC FL 32903				82	Street Address (P.O. Box Number is Not Acceptable)			
MADE	ADMINIO PL 02000			83		- 11 Lidd - 11 L		
				84	City	FI	_ 85 Zip •	Code
agent. I am SIGNATURE	istered agent, or both, in the State familiar with, and accept the oblig	ations of, Section 607.05 0 5, F1	orida Sta	lules.		oration submits this statement for the purpose on's board of directors. I hereby accept the ap	pointment as	registered
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTOR	S IN 12
TITLE	OP 90	DELETE 1.171		ITLE			Change	Addition
NAME	BOBBITT, CRAIG F.			1.2 NAME				
STREET ADDRESS	333 TAMPA AVENUE	1.3 \$7		TREET A	ADDRESS			ļi,
CITY-ST-ZIP	INDIALANTIC FL			ITY-ST	- ZIP			
TITLE	DST	DELETE 2.1 TO					L Change	Addition !
NAME	BOBBITT, SUSAN C.	2.2 N						
STREET ADDRESS	333 TAMPA AVENUE				ADDRESS			
CITY-ST-ZIP			CITY-ST	r-21P		Change	Addition	
TITLE		-					☐ Criange	Addition
NAME Street address			3.2 NAME 3.3 STREE		INDRESS			
				COY-ST				
CITY-ST-ZIP TITLE		DELETE	DELETE 4.1 TI		1+211		Change	Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET		ADDRESS			
CITY-ST-ZIP			4.4 CITY -		- ZIP			ļ
TITLE		☐ DELETE	5.1 TITLE			,	☐ Change	☐ Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET		ADDRESS			
CITY-ST-ZIP			5.4 CITY -		- Z IP			
TITLE								
		DELETE	6.1 T	ITLE			☐ Change	Addition
NAME		DELETE	6.1 To				Change	Addition
NAME STREET ADDRESS		☐ DELETE	6.2 N 6.3 S	IAME	ADDRESS		☐ Change	Addition

4. 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 me 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.

CRAIG F

RORRITT

4/21/98 407 767 787