

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

REPUBLICAN
MAY 1995



DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

22 MAY 19 11:10:35

DOCUMENT # **K44078**

(9)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SURFING USA, INC.

6550 INTERNATIONAL DR
#108
ORLANDO FL 32819
US

169 E FLAGLER ST
#1521
MIAMI FL 33131
US

DO NOT WRITE IN THIS SPACE

2	2a	2b	3	3a
21	26	27	4	4a
22	27	28	5	5a
23	28	29	6	6a
24	29	30	7	7a

2a: 6550 INTERNATIONAL DR, #108, ORLANDO FL 32819, US
2b: 169 E FLAGLER ST, #1521, MIAMI FL 33131, US
27: 261 N.E. 1st St. 4th fl.
28: Miami, FL
29: 33132
30: Dade
3: 11/07/1988
3a: 05/01/1994
4: 65-0079616
4a: Applied For
4b: Not Applied For
5: \$8.75 Additional Fee Required
5a: \$5.00 May Be Added to Fees
6: Yes ☐ No ☒
7: Yes ☐ No ☒

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NISSIM, BEN S
169 E. FLAGLER ST. SUITE 1521
MIAMI FL 33131

81 Name: BEN-SHOAFF, NISSIM
82 Street Address (P.O. Box Number is Not Acceptable): 261 N.E. 1st STREET
83 4th Floor
84 City: Miami FL 85 Zip Code: 33132

11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the foregoing is a true and correct copy of the information required by the Florida Statutes, and I accept the responsibility of such certification as required by the Florida Statutes.

SIGNATURE: *X N.B. Shoaff*

By signing this report, you agree to the following conditions:

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
NAME	D SHOAFF, NISSIM BEN	1. NAME	
STREET ADDRESS	1390 CLEVELAND RD.	2. NAME	
CITY	MIAMI BEACH FL	3. NAME	
STATE		4. NAME	
ZIP CODE		5. NAME	
1. NAME		6. NAME	
2. NAME		7. NAME	
3. NAME		8. NAME	
4. NAME		9. NAME	
5. NAME		10. NAME	
6. NAME		11. NAME	
7. NAME		12. NAME	
8. NAME		13. NAME	
9. NAME		14. NAME	
10. NAME		15. NAME	
11. NAME		16. NAME	
12. NAME		17. NAME	
13. NAME		18. NAME	
14. NAME		19. NAME	
15. NAME		20. NAME	

14. I hereby certify that the information required with this filing is voluntarily furnished and does not contain any false or misleading information, and that the information is true and accurate, and that my corporation shall have the right to publish this information in any newspaper of general circulation in this state, and that my corporation shall have the right to publish this information in any newspaper of general circulation in this state, and that my corporation shall have the right to publish this information in any newspaper of general circulation in this state.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR