


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 07, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # K65436**  
 1. Entity Name  
**ONE WORLD SURF DESIGNS, INC.**



Principal Place of Business      Mailing Address  
**C/O JUAN ISIDRO RODRIGUEZ**      **C/O JUAN ISIDRO RODRIGUEZ**  
**P. O. BOX 5353**                      **P. O. BOX 5353**  
**SARASOTA, FL 34277-2353**        **SARASOTA, FL 34277-2353**



01312004    No Chg-P    CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number      Applied For  
**65-0116212**      Not Applicable

5. Certificate of Status Desired        **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**RODRIGUEZ, JUAN ISIDRO**  
**6245 CLARK CENTER AVE**  
**SARASOTA, FL 34238**

**DO NOT WRITE IN THIS SPACE**

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

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.        **\$5.00 May Be Added to Fees**

00000039993  
 02/09/04-80030-009 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP	DVPT RODRIGUEZ, JUAN ISIDRO 6245 CLARK CENTER AVE SARASOTA, FL
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**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Juan Rodriguez      **JUAN I. RODRIGUEZ**      1/31/04      941-925-0007  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      DATE      Daytime Phone #