

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 28, 2002 8:00 am**  
**Secretary of State**

07-28-2002 90204 013 \*\*\*150.00

**DOCUMENT # P01000021387**

1. Entity Name  
**ON THE SURFACE, INC.**

Principal Place of Business

**1009 SHIMMERING SAND DR.  
 OCOEE FL 34761**

Mailing Address

**1009 SHIMMERING SAND DR.  
 OCOEE FL 34761**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

**1177 Vickers Lake Dr**

Suite, Apt. #, etc.

3. Mailing Address

**1177 Vickers Lake Dr**

Suite, Apt. #, etc.

City & State

**Ocoee, FL**

City & State

**Ocoee, FL**

4. FEI Number

**59-3733802**

Applied For

Not Applicable

Zip

**34761**

Country

**USA**

Zip

**34761**

Country

**USA**

5. Certificate of Status Desired ☐

**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

**LLAFET, JERRY**

**1009 SHIMMERING SAND DR.**

**OCOEE FL 34761**

7. Name and Address of New Registered Agent

Name

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

City

**FL**

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back)



**FILE NOW!!! FEE IS \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

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

11. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete  
 NAME **LLAFET, JERRY**  
 STREET ADDRESS **1009 SHIMMERING SAND DR.**  
 CITY-ST-ZIP **OCOEE FL 34761**

TITLE **VD** ☐ Delete  
 NAME **HYDE, CRAIG**  
 STREET ADDRESS **1009 SHIMMERING SAND DR.**  
 CITY-ST-ZIP **OCOEE FL 34761**

TITLE **STD** ☐ Delete  
 NAME **LLAFET, LISA M**  
 STREET ADDRESS **1009 SHIMMERING SAND DR.**  
 CITY-ST-ZIP **OCOEE FL 34761**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
 NAME  
 STREET ADDRESS **1177 Vickers Lake Dr**  
 CITY-ST-ZIP **Ocoee, FL 34786**

TITLE ☒ Change ☐ Addition  
 NAME  
 STREET ADDRESS **1177 Vickers Lake Dr**  
 CITY-ST-ZIP **Ocoee, FL 34761**

TITLE ☒ Change ☐ Addition  
 NAME  
 STREET ADDRESS **1177 Vickers Lake Dr**  
 CITY-ST-ZIP **Ocoee, FL 34761**

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

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

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

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7/27/02**

Date

**407-293-3080**

Daytime Phone #

CR2E034 (4/02)

Attachment  
DH#P01000021387  
BD132738

July 25, 2002

Secretary of State  
Division of Corporations  
Tallahassee, FL 32302-1500

Dear Sirs,

Please accept this renewal report with the fee of \$150.00. We never received the original renewal for this corporation because of an address change. The new address is reported on our renewal forms.

Thank you so much with your attention to this matter.

Sincerely,



Gerald Llafet  
On The Surface Inc.  
1177 Vickers Lake Dr  
Ocoee, FL 34761