


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2004 8:00 am
Secretary of State

03-30-2004 90003 001 ***150.00

DOCUMENT # P01000034773	
1. Entity Name FUN WAVES OF CLEARWATER, INC.	

Principal Place of Business 521 GULFVIEW BLVD. CLEARWATER, FL 33767	Mailing Address 2961 FOUNTAINHEAD DR. 2991 LOS ALTOS DRIVE LARGO APT #1 BELLAIR BLUFFS, FL 33770
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54024200



03022004 No Chg-P CR2E034 (10/03)


DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3708051	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent STEWART, GAVIN 2991 LOS ALTOS DRIVE 2961 FOUNTAINHEAD DR. APT #1 BELLAIR BLUFFS, FL 33770 LARGO

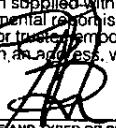
**DO NOT WRITE
IN THIS SPACE**

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 	GAVIN STEWART	3/8/04
<small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		<small>DATE</small>

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STEWART, BRIAN 2507 BAY BLVD #B INDIAN ROCKS BEACH, FL 33785
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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)(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: 	BRIAN STEWART	3/8/04
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>DATE</small>
		727 469 8886
		<small>Daytime Phone #</small>