## **2008 FOR PROFIT CORPORATION ANNUAL REPORT**

## **DOCUMENT # P05000032289**

SURFSIDE ASSETS, INC.



Principal Place of Business

5450 ESSEX COURT WEST PALM BEACH, FL 33405 Mailing Address

C.R. O'CONNOR PEGG& PEGG 1430 BROADWAY, STE 1105 A NEW YORK, NY 10018

## **FILED** Jul 31, 2008 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

07232008 No Chg-P CR2E034 (11/05)

4. FEI Number 56-2507447

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TITTLE, JAMES D ESQ 11382 PROSPERITY FARMS ROAD BRIDGE STE. 222 PALM, BEACH GARDENS, FL 33410

DO NOT WRITE IN THIS SPACE

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	named entity submits this statement for thions of registered agent.	e purpose of changing its regi	stered office or re	gistered agent, or b	oth, in the State of Florida U000009567 37/31/08-8000	a Tamfamiliar with, and accept 48 3-005 150:00
SIGNATURE.	Signature, typed or printed name of registered agent and	utie il applicable (NOTE Reg	stered Agent signature i	equired when reinstating)		DATE
	LE NOW!!! FEE IS \$150.00 ue by September 12, 2008	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10.	OFFICERS AND DIF	RECTORS	1000		<del></del>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD O'CONNOR, C. RODNEY R 5450 ESSEX COURT WEST PALM BEACH, FL 33405					
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TITLE NAME STREET ADDRESS CITY-ST-ZIP						

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 addre-

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP