

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Jan 20 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P93000031824 (4)

1. Corporation Name

SURF JEWELRY & PAWN, INC.

Principal Place of Business

8801 FRONT BEACH RD  
PANAMA CITY BCH. FL 32407

Mailing Address

8801 FRONT BEACH RD  
PANAMA CITY BCH. FL 32407



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 564 LAGOON OAKS DR  
Suite, Apt. #, etc.

22

City & State

23 PANAMA CITY BEACH, FL

24 32408  
Zip

25 Bay  
Country

26. Mailing Address

26 564 LAGOON OAKS DR  
Suite, Apt. #, etc.

27

City & State

28 PANAMA CITY BEACH, FL

29 32408  
Zip

30 Bay  
Country

3. Date Incorporated or Qualified

04/28/1993

4. FEI Number

59-3182396

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

HARLAN, ANNA J  
8801 FRONT BEACH RD  
PANAMA CITY BCH. FL 32407

10. Name and Address of New Registered Agent (Address Change)

81 Name

ANNA J. HARLAN

82

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

564 LAGOON OAKS DR.

83

84

City

PANAMA CITY BEACH

FL

85 Zip Code

32408

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Anna J. Harlan ANNA J. HARLAN Sec/Treas. 1-6-98  
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	HARLAN, THOMAS S.	
STREET ADDRESS	564 LAGOON OAKS DR.	
CITY-ST-ZIP	PANAMA CITY BCH FL	
TITLE	VPST	<input type="checkbox"/> DELETE
NAME	HARLAN, ANNA J.	
STREET ADDRESS	564 LAGOON OAKS DR.	
CITY-ST-ZIP	PANAMA CITY BCH FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Anna J. Harlan ANNA J. HARLAN 1-6-98 850-233-0308

CR2E034 (10/97)