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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P93000047285 (0)

FINTASTIC SURF & SPORT, INC.

Principal Place of Business

8612 OLD WINTER GARDEN

Mailing Address

8612 OLD WINTER GARDEN RD

FILED Mar 04 1997 8:00am Secretary of State



US US		ORLANDO FL 32835-1233 US		Date Incorporated or Qualified 06/28/1993	F	of Last Re /1996	·
	lace of Business	2a. Mailing Address	K 200	4. FEI Number			plied For
	50. SCHORLY BLYD.	26 Y/	EMBRAN BLYD.	59-3188697			t Applicable
Suite, Àpt 22 いんて	FR PHALL FL.	27		5. Certificate of Status Desired		\$8.75 A Fee Re	
City & State	⁶ 792	City & State 28 WINTEN PRIM		Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	
Zip 32√{	192 25 URWGE	29 32792 3	Country	This corporation has liability for in Florida Statutes	ntangible ta Yes []		199,032,
	9. Name and Address of Current F		20 1	10. Name and Address of New Reg			
WYA	ATT, DONNA C		81 Name				
1961	1 COVE COLONY RD		B2 Street Addre	ess (P.O. Box Number is Not Acceptab	le)		
MAI	TLAND FL 32751		83				
			84 City		FL	85 Zip (Code
SIGNATURE	Signal and specifier pointed name or registered agent a OFFICE RS AND C		Registered Agent signature require	ed when reinstaling) ADDITIONS/CHANGES TO OFFIC	DATE.	IDECTOR	C IN 12
Tillé	I	DELETE	1.1 TOLE	ADDITIONS/CHANGES TO OTHE		Change	Addition
NAME	D Hoyt, andrew w	otter	1.2 NAME		<u></u>	_ crange	
STREET ADDRESS	2243 CHURCHILL DOWNS CIRC	IF	1.3 STREET ADDRESS				
City - St - 7IP	ORLANDO FL 32825		1.4 CITY-ST-ZIP				
TITLE	D	DELETE	2.1 TITLE			Change	Additio
NAMÉ	WYATT, DONNA C		2 2 NAME			•	
STREET ADDRESS	1961 COVE COLONY RD		2.3 STREET ADDRESS				
CITY - ST - ZIP	MAITLAND FL		2 4 CITY-ST-ZIP		· · · · · ·		
TIFLE	D	L_] DELETE	3 1 TITLE		L	_] Change	Additio
NAME	GRAHAM, DARYL G		32 NAME				
STREET ACRORESS	1961 COVE COLONY RD MAITLAND FL		33 STREET ADDRESS				
DITY - ST - ZIP THUT	MAVICARD FL	DELETE	3 4. CITY-ST-ZIP			Change	Addilio
NAME			4 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
			1.0 0111241 110011000				
DITY-\$1-ZP			4.4 CITY - ST - ZIP			 	
DHY-ST-Z-P Tifle		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE			Change	Additio
TITLE NAME		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME		[Change	Additio
TITLE NAME STREET ADDRESS		[] סבנבונ	4.4 CITY - ST- ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS		[.	_ Change	Additio
TITLE NAME STREET ADDRESS CITY-ST-ZIF			4.4 CITY - ST- ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST- ZIP				Additio
TITLE NAME STREET ADDRESS CITY-ST-ZIE TITLE		DELETE	4.4 CITY - ST- ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS			Change	
TITLE NAME STREET ADDRESS CITY-ST-ZIF			4.4 CITY - ST- ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST- ZIP 6.1 TITLE				

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

SIGNATURE: