

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

FILED  
May 01 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000058273 (2)

1. Corporation Name

EARTH SURFING, INC.

Principal Place of Business

1575-6 MAIN STREET  
ATLANTIC BEACH FL 32233

Mailing Address

1575-6 MAIN STREET  
ATLANTIC BEACH FL 32233

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 4059 Oceanside Blvd		26 146 Levy Road		08/19/1993	
22 Suite E		27 Suite, Apt. #, etc.		4. FEI Number	
23 Oceanside CA		28 Atlantic Beach, FL		59-3197373	
24 92056		29 32233		5. Certificate of Status Desired	
25 USA		30 USA		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

MAURER, DONALD G JR  
146 LEVY ROAD  
ATLANTIC BEACH FL 32233

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	VP-D
NAME	STRUMPF, TERRY	1.2 NAME	
STREET ADDRESS	1171 BEACH BLVD.	1.3 STREET ADDRESS	900 Calle Negocio
CITY-ST-ZIP	JACKSONVILLE BEACH FL 32250	1.4 CITY-ST-ZIP	San Clemente, CA 93673
TITLE	D	2.1 TITLE	
NAME	THOMPSON, RICHARD L	2.2 NAME	
STREET ADDRESS	PO BOX 49287, N/A	2.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE BEACH FL 32250	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	P-S/T-D
NAME		3.2 NAME	Brian L. Cregan
STREET ADDRESS		3.3 STREET ADDRESS	22 Myrniong Grove
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Berrava, New South Wales, Australia
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: *[Signature]* 4-7-98 710-AN-9724