FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

APPROVED
AND
FILED

95 MAY 10 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000083342 (4)**

1. Corporate Name
WAVES EDGE, INC.

Principal Place of Business	Mailing Address
C/O JOHN ALLEN 401 N ATLANTIC BLVD. FT. LAUDERDALE FL 33304	C/O JOHN ALLEN 401 N ATLANTIC BLVD. FT. LAUDERDALE FL 33304

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **11/29/1993**
3a. Date of Last Report: **03/23/1994**

2. Principal Place of Business
21
Street Address
22
City & State
23
Zip 24 County 25

2a. Mailing Address
26
Street Address
27
City & State
28
Zip 29 County 30

4. FEI Number: **65-0455311** — 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 has liability for corporate tax under S. 220.02, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

ALLEN, JOHN
401 N ATLANTIC BLVD.
FT. LAUDERDALE FL 33304

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 Section 607.0501, 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

12. OFFICER AND DIRECTORS

D
ALLEN, JOHN
401 N ATLANTIC AVENUE
FT. LAUDERDALE FL 33304

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this report is true and accurate and that my signature shall serve 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 this report complies with the applicable provisions of Florida Statutes.

SIGNATURE: *John Allen*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date

0211606 CP