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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9500094663

Corporation Name

GLOBAL SURF, INC.

FILED Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90158 036 ***150.00

GLODAL	Soni, INO.						
Principal Place	e of Business	Mailing Address	-			FERTI AVELD BILLIO ENIO	 -
10668 N 159TH COURT 10668 N 159TH COURT JUPITER FL 33478 JUPITER FL 33478					DO NOT WOLLD IN THE	N ODACE	
					DO NOT WRITE IN THIS	SPACE	
					3. Date Incorporated or Qualifed		J
		1 a 14-35- a 4-4			12/14/1995 4, FEI Number	Applie	d Ear
	Place of Business 2a. Mailing Address					1 11	pplicable
21	26 Suite, Apt. #, etc.				65-0631946	\$8.75 Add	
					5. Certifcate of Status Desired	Fee Requi	
27 27 City & State City & State					6. Election Campaign Financing	\$5.00 Ma	v Bø
23	¬				- Trust Fund Contribution -	Added to F	* 1
Zip			Country	<i>r</i>	8. This corporation owes the current year in	tangible	
24	25	29	30		Personal Property Tax.		No
	9. Name and Address of Curren	t Registered Agent		т	10. Name and Address of New Registered	Agent	
	10000 11107II		81	Name			
CALABRESE, MARTIN L			82	Street Add	ress (P.O. Box Number is Not Acceptable)		
10668 N 159TH COURT							
JUPI	TER FL 33478		83				}
			84	City	FL	85 Zip Cod	le
agent, I a	Signature, types or printed name of registered ages	at and title if applicable (NOTE:	Registered Age		on's board of directors. I hereby accept the appo		
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A		Addition
TITLE	D	☐ DELETE	1.1 TITLE		,	Change	Audition
NAME	CALABRESE, MARTIN L		1.2 NAME				i
STREET ADDRESS	10668 N 159TH COURT			TADDRESS			
CITY-ST-ZIP			1.4 CITY-5	ST-ZIP		Change	☐ Addition
TITLE		□ ncrese	2.1 TITLE			+ā^	ر المحدد . ر_
NAME			2.2 NAME	T +DDDESS			
STREET ADDRESS				TADDRESS			}
CITY-ST-ZIP		□ DELETÉ	2.4 CITY-:	31-4IP		☐ Change	Addition
TITLE		المالية المالية	3.2 NAME			_ •	_
NAME				TADDRESS -			
STREET ADDRESS	· ·		3.4. CITY-				i
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE	· · · · ·		Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP			4.4 CITY-5				
TITLE		☐ DELETÉ	5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	T ADDRESS			ļ
CITY-ST-ZIP			5.4 CITY-5	ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME			•	1

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, with all other like empowered.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phor

CR2E034 (11/98