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Apr 04 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P96000017967 (6)

1. Corporation Name

SURFSIDE FINANCIAL SYSTEMS CORP.



Principal Place of Business

821 EAST BROWARD BLVD.  
FORT LAUDERDALE FL 33301

Mailing Address

821 EAST BROWARD BLVD.  
FORT LAUDERDALE FL 33301-2064

3. Date Incorporated or Qualified

02/26/1996

3a. Date of Last Report

2. Principal Place of Business

21 1411 SW 31 Avenue

Suite, Apt. #, etc.

22 City & State

23 Pompano Beach, FL

24 33069

Country

USA

2a. Mailing Address

26 1411 SW 31 Avenue

Suite, Apt. #, etc.

27 City & State

28 Pompano Beach, FL

29 33069

Country

USA

4. FEI Number

65-067 3223

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 intangible tax under s. 199.032,  
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

MINIACI, ALBERT J  
821 EAST BROWARD BLVD.  
FORT LAUDERDALE FL 33301

10. Name and Address of New Registered Agent

81 Name

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

1411 Southwest 31st Avenue

83

84 City

Pompano Beach,

FL

85 Zip Code

33069

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

TITLE D  
NAME MINIACI, ALBERT J  
STREET ADDRESS 821 E. BROWARD BLVD.  
CITY-ST-ZIP FORT LAUDERDALE FL 33301

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD  
1.2 NAME Miniaci, Albert J.  
1.3 STREET ADDRESS 1411 Southwest 31 Avenue  
1.4 CITY-ST-ZIP Pompano Beach, FL 33069

2.1 TITLE VS  
2.2 NAME Dominick F. Miniaci  
2.3 STREET ADDRESS 821 E. Broward Boulevard  
2.4 CITY-ST-ZIP Ft. Lauderdale, FL 33301

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 of this report.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/30/97

954/978-0500

Date

Daytime Phone #

0067701

CR2E034 (9/96)