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FILED  
Feb 23 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P96000036236 (3)

1. Corporation Name

ONE WAY SKATEBOARD DESIGNS, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
774 SW 17TH AVE  
DELRAY BEACH FL 33444  
US

Mailing Address  
774 SW 17TH AVE  
DELRAY BEACH FL 33444  
US

2. Principal Place of Business  
21 Suite, Apt. #, etc.  
22 City & State  
23 Zip  
24 Country

2a. Mailing Address  
26 Suite, Apt. #, etc.  
27 City & State  
28 Zip  
29 Country

3. Date Incorporated or Qualified  
04/23/1996  
4. FEI Number  
65-0661757  
5. Certificate of Status Desired  
6. Election Campaign Financing  
Trust Fund Contribution  
8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

9. Name and Address of Current Registered Agent  
LANDINO, ANTHONY M  
4901 NORTHWEST 17TH WAY  
SUITE 305  
FORT LAUDERDALE FL 33309

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
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  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
MULLEN, RICH  
1421 ALLEN AVE  
DELRAY BEACH FL  
VTSM  
AMELUNG, MICHAEL L  
226 NE 7TH AVE  
DELRAY BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
PD  
MULLEN, RICHARD J.  
130 ANDREWS AVE #6  
DELRAY BEACH FL 33483  
2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
VTSM  
AMELUNG, MICHAEL L.  
500 LAYERS CIR #248  
DELRAY BEACH FL 33444

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] 2-11-98 8:15 PM

CR2E034 (10/97)