

FILED
May 28, 2002 8:00 am
Secretary of State

05-02-2002 90102 041 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P970000 16920

1. Entity Name

SURF CAFE INC.

DO NOT WRITE IN THIS SPACE

30634

2. Principal Place of Business

395 NE SPANISH RIVER

Suite, Apt. #, etc.

BLVD

3. Mailing Address

395 NE SPANISH RIVER

Suite, Apt. #, etc.

BLVD.

DO NOT WRITE IN THIS SPACE

City & State

BOCA RATON FL

City & State

BOCA RATON FL

4. FEI Number

15466 3536

Applied For

Not Applicable

Zip

33431

Country

PBC

Zip

33431

Country

PBC

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

THEODORE BAXTER

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

395 NE SPANISH RIVER BLVD

City BOCA RATON

FL

Zip Code

33431

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when resigning)

DATE

9. This corporation is eligible to satisfy its intangible

Tax filing requirement and elects to do so.
(See criteria on back)☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.☐\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT THEODORE HILL BAXTER 706 SE 5TH COURT DEERFIELD BEACH FL 33441	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**DO NOT WRITE
IN THIS SPACE**

13. 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 report or supplementary 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 11 or on an attachment with an address, with all power like empowered.

SIGNATURE:

THEODORE H. BAXTER

THEODORE H. BAXTER

4/18/02

561

251 7714

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E0348 (12/01)