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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000071984 (3)

FILED Apr 14 1998 8:00am Secretary of State

SURFS	SIDE SOFTWARE, INC.		` '					
Principal Place of Business Mailing Address							TABL INDIA DANDI KAKIY AKAK 1887	
1810 STRAN		1810 STRAND STREET NEPTUNE BEACH FL 32266				DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified		7
					 	08/20/1997		
	lace of Business	2a. Mailing Ad	2a. Mailing Address			4. FEI Number	Applied For	4
21 Suite Ant # etc		26	Suite, Apt. #, etc.			59-3464048	Not Applicable	4
Suite, Apt. #, etc.		F1	├ ₁			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	9	City & Sta	te			6. Election Campaign Financing	\$5.00 May Be	\dashv
23	-	28]				Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	T	Country		8. This corporation owes or has paid the co		1
24	25	29	3	0		Personal Property Tax due June 30.	Yes No	
	9. Name and Address of Currer	it Registered Ager	nt			10. Name and Address of New Registered	j Agent	4
	LLER, JOHN M			81	Name			
105-B SOLANA ROAD				82	Street Add	fress (P.O. Box Number is Not Acceptable)	<u> </u>	1
PC	ONTE VEDRA BEACH FL 32082					· · · · · · · · · · · · · · · · · · ·	 -	4
				83				
				84	City		85 Zip Code	7
						F		4
l office or r	edistered agent, or both, in the State	of Horida, Such et	iange was au	thorized by	rthe corpora	poration submits this statement for the purpose ation's board of directors. I heroby accept the ap	ppointment as registered	
agent. I a	m familiar with, and accept the oblig	ations of, Section 6	07.0505, Flori	da Statutes	3.			
SIGNATURE	Signature, typed or printed name of registered agr	out and to a if our booklo	ANCORE	Dogistored Age	nt e ocature recu	pred when reinstating) DATE		ا.
12.	OFFICERS AN		more.	13.	an agriculture requ	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12	- {
TITLE	D DELETE 1		1.1 THLE			Change Addition		
NAME			1.2 NAME				3	
STREET ADDRESS	1810 STRAND STREET			1.3 STREET	ADDRESS			Į č
CITY-ST-ZIP	NEPTUNE BEACH FL 32266			1.4 CiTY - S	T-ZIP			
TITLE			DELETE	2.1 TITLE			☐ Change ☐ Addition	٦
NAME			2.2 NAME					
STREET ADDRESS				2.3 STREFT	ADDRESS			
CITY-ST-ZIP			,	2.4 CITY-5	ST-ZIP			_
TITLE		ليا	DELETE	3.1 TITLE			Change Addition	
NAME				3.2 NAME	1			
STREET ADDRESS				3.3 STREET				
CITY-ST-ZIP			DELETE	3.4. CHY-5	S1 - 7(P		☐ Change ☐ Addition	+
TITLE		L	ו טנננונ	4.1 TITLE			C cusude C vocation	
NAME				4. 2 NAME	4000000			
STREET ADDRESS				4.3 STREET				
CITY-ST-ZIP			DILETE	4.4 CITY - S 5.1 TITLE	1-219		Change Addition	Н
TITLE MALE		.	PLLLIE	5.7 NAME			المالان ال	
NAME STREET ADDRESS				5.3 STREET	ADDRESS			
CITY-ST-ZIP				5.4 CITY - S				
TITLE			DELETE	6.1 TITLE			Change Addition	1
NAME				6.2 NAME	ļ			
STREET ADDRESS				6.3 STREET	ADDRESS			
OTY-ST-ZIP 6.				6.4 CITY - S	1-2IP			
14. hereby	certify that the information supplied w	ith this filing does i	not qualify for	the exemp	lion stated in	n Section 119.07(3)(i), Florida Statutos. I further	certify that the information	7

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 eath; 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 an an attachment with an address.

NOMATURE.

Crain Laidu

2-21-96 (904) 247-186