

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000030748

1. Entity Name

CATCH THE WAVE FLORIDA, INC.

FILED

Apr 27, 2000 8:00 am
Secretary of State

04-27-2000 90063 024 ***158.75

Principal Place of Business

Mailing Address

1193 NW 114 AVE
CORAL SPGS FL 33071

1193 NW 114 AVE
CORAL SPGS FL 33071-6310

2. Principal Place of Business

1744 COLONIAL DR
Suite, Apt. #, etc.

3. Mailing Address

1744 COLONIAL DR
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State CORAL SPRINGS FL		City & State CORAL SPRINGS FL		4. FEI Number 65-0834511	Applied For Not Applicable
Zip 33071	Country USA	Zip FL 33071	Country USA	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent MARTIN, JENNY 1193 NW 114 AVE CORAL SPGS FL 33071		7. Name and Address of New Registered Agent Name MARTIN, JENNY Street Address (P.O. Box Number is Not Acceptable) 1744 COLONIAL DR CITY CORAL SPRINGS City FL Zip Code 33071	
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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 JENNY MARTIN (NOTE: Registered Agent signature required when reinstating)
DATE 4/25/00

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PRATTE, ALAN 1193 NW 114 AVE CORAL SPGS FL 33071 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT STEVE BAZSULY 1744 COLONIAL DR CORAL SPRINGS FL 33071 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPST BAZSULY, STEVE 1193 NW 114 AVE CORAL SPGS FL 33071 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC-TREAS. STEVE BAZSULY 1744 COLONIAL DR CORAL SPRINGS FL 33071 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 supplemental 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 Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: STEVE BAZSULY DATE 4/25/00 DAYTIME PHONE # 954-227-5927