

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2004 08:00 AM
Secretary of State

DOCUMENT # P98000107720

1. Entity Name
ORLANDO SURF INC.



Principal Place of Business
**4100 NORTH 28TH TERRACE
HOLLYWOOD, FL 33021**

Mailing Address
**4100 NORTH 28TH TERRACE
HOLLYWOOD, FL 33021**

DO NOT WRITE IN THIS SPACE



03112004 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0885477

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**ADELESTONE
1946 TYLER STONE ST
HOLLYWOOD, FL 33020**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**U000000092387
03/19/04-80007-008 150.00**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	MAINASKY, DORON
STREET ADDRESS	3159 N 34TH ST
CITY-ST-ZIP	HOLLYWOOD, FL 33021
TITLE	VP
NAME	LEVY, ELIYAHU
STREET ADDRESS	13245 KEYSTONE ISLE DR
CITY-ST-ZIP	MIAMI, FL 33181
TITLE	VP
NAME	ZISLIN, SHAUL
STREET ADDRESS	3170 NORTH 35TH ST
CITY-ST-ZIP	HOLLYWOOD, FL 33021
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11, if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Doron Malinasky* **Doron Malinasky** **03/11/04 (954)924-9779**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #