2008 FOR PROFIT CORPORATION

ANNUAL REPORT FILED Apr 14, 2008 08:00 All Secretary of State **DOCUMENT # S37473** 1. Entity Name SURF WEST, INC. Principal Place of Business Mailing Address 4100 NW 28TH TERR 4100 N 28TH TERR HOLLYWOOD, FL 33020 HOLLYWOOD, FL 33020 US 84. 国际经济通过 No Chg-P 01112008 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3061155 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent OVAKNIN, AVRAHAM DO NOT WRITE 4100 N 28TH TERR HOLLYWOOD, FL 33020 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) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE LEVY, ELIYAHU NAME STREET ADDRESS 4100 N 28TH TERR CITY-ST-ZIP HOLLYWOOD, FL 33020 TITLE OVAKNIN, AVI STREET ADDRESS 4100 N 28TH TERR CITY-ST-ZIP HOLLYWOOD, FL 33020 TITLE MALINASKY, DORON NAME STREET ADDRESS 4100 N. 28TH TERR. DO NOT WRITE CITY-ST-ZIP HOLLYWOOD, FL IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 eath; that I am an efficient 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:

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

4/7/08 (954) 924-9779