

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

FILED

**May 21 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000080642
1. Corporation Name
TWO QUEENS, INC

Principal Place of Business Mailing Address
**One Financial Plaza
Suite 2020
Ft Lauderdale, FL 33394**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address
21 **One Financial Plaza** 26 **same**
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 **Suite 2020** 27
City & State City & State
23 **Ft Lauderdale, FL** 28
Zip Country Zip Country
24 **33394** 25 **USA** 29 30

3. Date Incorporated or Qualified
Sept. 30, 1996

4. FEI Number
65-0702441

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

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

7. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
**CARYN GOLDENBERG CARVO, ESQ
4875 N. Federal Hwy 7th floor
Ft Lauderdale, FL 33308**

10. Name and Address of New Registered Agent

81 Name **CARYN GOLDENBERG CARVO, ESQ**

82 Street Address (P.O. Box Number is Not Acceptable)
One Financial Plaza

83 **Suite 2020**

84 City **Ft Lauderdale** FL 85 Zip Code **33394**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0502, Florida Statutes.

SIGNATURE **Caryn Goldenberg Carvo** DATE **4/30/98**

12. OFFICERS AND DIRECTORS

TITLE DELETE
NAME **President**
STREET ADDRESS **Nancy Spender**
CITY-ST-ZIP **4222 Indiverny Blvd
Lauderhill, FL 33319**

TITLE DELETE
NAME **SECRETARY/TREASURER**
STREET ADDRESS **CARYN CARVO**
CITY-ST-ZIP **One Financial Plaza, Suite 2020
Ft Lauderdale FL 33394**

TITLE DELETE

TITLE DELETE

TITLE DELETE

TITLE DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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-05/22/98--01031---002
*****150.00**

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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Caryn Goldenberg Carvo** DATE **4/30/98** (954) 524-4450

CR2E034 (10/97)