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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # P96000099003

2+2 OF CORAL SPRINGS, INC.

Principal Place of Business Mailing Address 7675 WEST SAMPLE ROAD 7675 WEST SAMPLE ROAD CORAL SPRINGS FL 33065 CORAL SPRINGS FL 33065

FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90192 045 ***150.00



DO NOT WRITE IN THIS SPACE

	,				3. Date Incorporated or Qualifed 12/06/1996		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number Applied F	or	
21		26			65-0721362 Not Applie	cable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				sired \$8.75 Additional Fee Required	
City & State	•	City & State	City & State		6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Country		8. This corporation owes the current year Intangible		
24	25		30		Personal Property Tax. ✓ Yes □ No	□No	
	g. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent		
				81 Name			
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525			82 Street Add		Idress (P.O. Box Number is Not Acceptable)		
			02				
			83				
			84	City	FL 85 Zip Code		
A. Durana at	to the assulations of Continue 607 0500	and 607 1508 Florida Statutos	the abov	a_named.cor	progration submits this statement for the purpose of changing its registe	ered	
office or n	egistered agent, or both, in the State c	of Florida. Such change was autt	nonzed by	the corporal	ation's board of directors. I hereby accept the appointment as registered	ď	
agent. I a	m familiar with, and accept the obligati	ions of, Section 607.0505, Florid	a Statutes				
SIGNATURE		TOTAL DE LA COMPANIA			uired when reinstating) DATE	~	
	Signature, typed or printed name of registered agent OFFICERS ANI	;	13.	и экупалите педин	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	12	
TITLE	PD OFFICERS AND	DELETE	1.1 TITLE	$\overline{}$		Addition	
NAME	PERNICE, PAT		1.2 NAME				
STREET ADDRESS	7675 WEST SAMPLE ROAD			TADORESS			
CITY-ST-ZIP	CORAL SPRINGS FL 33065		1.4 CITY-S				
TITLE	VSTD	☐ DELETE	2.1 TITLE		Change A	Addition	
NAME	NAGEL. MIKE		2.2 NAME	}			
STREET ADDRESS	7675 WEST SAMPLE ROAD		2.3 STREE	TADDRESS			
CITY-ST-ZIP	CORAL SPRINGS FL 33065		2. 4 CITY-5				
TITLE	COLUMN LINE LE ASSOCIA	☐ DELETE	31 TITLE		☐ Change ☐ A	Addition	
NAME .			32 NAME				
STREET ADDRESS			3.3 STREE	T ADDRESS		_	
CITY-ST-ZIP	İ		3.4. CITY-5	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		Change A	Addition	
NAME			4. 2 NAME				
STREET ADDRESS			4 3 STREE	T ADDRESS			
CITY-ST-ZIP	·		4.4 CITY-8	T-ZIP			
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ A	Addition	
NAME	-		5.2 NAME				
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP			5.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	6.1 TITLE	ł	☐ Change ☐ A	Addition	
NAME			6.2 NAME				
STREET ADDRESS				T ADDRESS			
OTT (CT 710			6.4 CITY- 9	T-ZIP			

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 suppliemental 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, with all other like empowered.

SIGNATURE:

14-20-99 Date

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