I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.			
SIGNATURE <sup>,</sup> BEATRICE LOSBORN	PRESIDENT	02/09/2015	

SIGNATURE: BEATRICE I OSBORN Electronic Signature of Signing Officer/Director Detail

City-State-Zip: FT LAUDERDALE FL 33301

Electronic Signature of Registered Agent Officer/Director Detail :

Ollioci/Direc			
Title	P	Title	V
Name	OSBORN, BEATRICE I	Name	OSBORN, ROBERT P.
Address	411 ISLE OF CAPRI	Address	411 ISLE OF CAPRI
City-State-Zip:	FT LAUDERDALE FL 33301	City-State-Zip:	FT LAUDERDALE FL 33301
Title	ST		
Name	OSBORN, BEATRICE I		
Address	411 ISLE OF CAPRI		
0.11 01-1- 7.4			

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.

Name and Address of Current Registered Agent: **OSBORN, BEATRICE I** 

FT LAUDERDALE, FL 33301 US

411 ISLE OF CAPRI

FEI Number: 65-0370179

FORT LAUDERDALE, FL 33301

**Current Mailing Address:** 

FORT LAUDERDALE, FL 33301 US

DOCUMENT# P92000005161

# 411 ISLE OF CAPRI

411 ISLE OF CAPRI

SIGNATURE:

Entity Name: 2-B PROPERTIES CORP.

**Current Principal Place of Business:** 

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

## Certificate of Status Desired: No

## FILED Feb 09, 2015 Secretary of State CC7143874230

Date

Date

PRESIDENT