

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
 AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

APPROVED AND FILED

97 MAY -1 PM 4:11

DOCUMENT # 724132 (6)  
 1. Corporation Name

THE COLONIES TWO, INC.

REINSTATEMENT 9/6-97  
 A. Alaw 5/11/97

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA



Principal Place of Business 2649 N.W. 47TH LANE LAUDERDALE LAKES FL 33313  
 Mailing Address 2649 N.W. 47TH LANE LAUDERDALE LAKES FL 33313

3. Date Incorporated or Qualified 08/16/1972  
 3a. Date of Last Report 08/11/1995

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 26 29 30

4. FEI Number 59-1804094 Applied For Not Applicable

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LEVIN, CHERYL, ESQ.  
 GARFIELD & LEVIN, P.A.  
 3500 N. STATE RD. SEVEN, STE. 333  
 FT. LAUDERDALE FL 33319

81 Name Cheryl J. Levin, P.A. Cheryl J. Levin, Esq.  
 82 Street Address (P.O. Box Number is Not Acceptable) 10226 NW 47th Street  
 83 ~~Street Address~~  
 84 City Sunrise FL 85 Zip Code 33351

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE Cheryl J. Levin, Esq. 4/23/97  
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when reinstating.) DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETED
P	COOPER, JOSEPH E.	2768 NW 47 LANE	LAUDERDALE LAKES FL	<input type="checkbox"/>
V	ANDREWS, MINNIE	3623 NW 47 LANE	LAUDERDALE LAKE FL	<input checked="" type="checkbox"/>
V	WHIATE, VIVETTE	2603 NW 47TH LANE	LAUDERDALE LAKES FL	<input type="checkbox"/>
D	PRICE, JOANNA	2711 NW 47 LANE	LAUDERDALE LAKE FL	<input checked="" type="checkbox"/>
D	BARRETT, SHARON	2604 N.W. 47TH LANE	LAUDERDALE LAKE FL	<input checked="" type="checkbox"/>
D	SMITH, KEMEW	2775 NW 47 LANE	LAUDERDALE LAKES FL	<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
		600002173136		<input checked="" type="checkbox"/>	<input type="checkbox"/>
		-05/09/97--01089--005		<input type="checkbox"/>	<input type="checkbox"/>
		****297.50 ****297.50		<input type="checkbox"/>	<input type="checkbox"/>
W	WIVETTE WHITE	2603 NW 47TH LANE	LAUDERDALE LKS FL 33313	<input checked="" type="checkbox"/>	<input type="checkbox"/>
S	Secretary Alice G. Donville	2715 NW 47 Lane	Laud. Lakes FL	<input checked="" type="checkbox"/>	<input type="checkbox"/>
D	D. DASHIA WINT	2648 NW 47 LANE	Lakes FL 33313	<input checked="" type="checkbox"/>	<input type="checkbox"/>
T	SHIRLEY M HALL	2617 NW 47 LN	LAUD LKS FL 33313	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D				<input type="checkbox"/>	<input type="checkbox"/>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Shirley M Hall* SIGNATURE REQUIRED 7-30-96 954-733-3818  
 Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E037 (3/96)