2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J59165

Title:

Name:

Address:

City-St-Zip:

Entity Name: CONGRESS VENTURE TWO, INC

FILED Feb 12, 2009 Secretary of State

•					
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
5589 OKEE STE 102	ECHOBEE BL\	/D			
WEST PAL	.M BEACH, FL	33417			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
STE 102	ECHOBEE BL\ .M BEACH, FL				
FEI Number:	,	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
SUITE 102	ARLES A ECHOBEE BL\ CH, FL 33417				
The above in the State	named entity s of Florida.	ubmits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			gent	Date	
Election Can	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	SISCA, CHARLE 5589 OKEECHO	Delete S BEE BLVD, SUITE 102 FACH, FL 33417	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD () SISCA, JOSEPH 1944 RTE 22 BREWSTER, N		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	COWIE, PETER 3300 PGA BLVI		Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: CHARLES SISCA PD 02/12/2009

() Delete

PALM BEACH GARDENS, FL 334102811

MCINTOSH, ROBERT A.,

3300 PGA BLVD. STE., 620

() Change () Addition