

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 04, 1999 8:00 am
Secretary of State

05-04-1999 90073 032 ***150.00

DOCUMENT # J70202

1. Corporation Name

EQUITY PLUS INVESTORS CORPORATION

Principal Place of Business

7055 CHESAPEAKE CIRCLE
BOYNTON BEACH FL 33462
US

Mailing Address

7055 CHESAPEAKE CIRCLE
BOYNTON BEACH FL 33462
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/30/1987

4. FEI Number

59-2805343

Applied For

Not Applicable

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

6. Election Campaign Financing ☐ \$5.00 May Be Added to Fees

Trust Fund Contribution

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 11460 S.E. 74th TER

Suite, Apt. #, etc.

22 City & State
23 Belleview, FL.

24 Zip 34420 25 Country

2a. Mailing Address

26 11460 S.E. 74th TER

Suite, Apt. #, etc.

27 City & State
28 Belleview, FL.

29 Zip 34420 30 Country

9. Name and Address of Current Registered Agent

GENTIL, CAROL L.
7055 CHESAPEAKE CIRCLE
BOYNTON BEACH FL 33462

10. Name and Address of New Registered Agent

81 Name CAROL L. GENTIL
82 Street Address (P.O. Box Number is Not Acceptable)
83 11460 S.E. 74th TER.
84 City Belleview, FL 85 Zip Code 34420

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 607.0505, Florida Statutes.

SIGNATURE

Carol Lynn Gentil

DATE 4-19-99

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 D ☐ DELETE
NAME WILLIAMS, DONALD
STREET ADDRESS 7055 CHESAPEAKE CIRCLE
CITY-ST-ZIP BOYNTON BEACH FL 33462

TITLE D ☐ DELETE
NAME GENTIL, CAROL L.
STREET ADDRESS 7055 CHESAPEAKE CIRCLE
CITY-ST-ZIP BOYNTON BEACH FL 33462

TITLE D ☐ DELETE
NAME JULIAN, RICHARD
STREET ADDRESS 7055 CHESAPEAKE CIRCLE
CITY-ST-ZIP BOYNTON BEACH FL 33462

TITLE T ☐ DELETE
NAME JULIAN, DAVID
STREET ADDRESS 7055 CHESAPEAKE CIRCLE
CITY-ST-ZIP BOYNTON BEACH FL 33462

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☒ Change ☐ Addition
1.2 NAME DONALD WILLIAMS
1.3 STREET ADDRESS 11460 S.E. 74th TER.
1.4 CITY-ST-ZIP Belleview, FL. 34420

2.1 TITLE D. ☒ Change ☐ Addition
2.2 NAME CAROL L. GENTIL
2.3 STREET ADDRESS 11460 S.E. 74th TER.
2.4 CITY-ST-ZIP Belleview, FL. 34420

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

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, with all other like empowered.

SIGNATURE:

Carol Lynn Gentil

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-99 (352) 307-7881

Date

Daytime Phone #

CR2E034 (11/98)

0054053