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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

P92000013045 (9)

Y2 ENTERPRISES, INC.

208 CAPE POINT CIR.

Principal Place of Business

Mailing Address

208 CAPE POINT CIR

FILED Jan 17 1997 8:00am Secretary of State



JUPITER FL 33477	JUPITER FL 33	477-9611					
				3. Date Incorporated or Qualified 12/18/1992	3a. Date 02/21	of Last Rep	ort
2. Principal Place of Busines		dress		4. FEI Number			ed For
Bood W. Bro	oward Blyd.26			65-0376860		✓ Not A	pplicable
Suite Apt. #, etc 2 Suite # 5009	Suite, Apt	#, etc.		5. Certificate of Status Desired		\$8.75 Add Fee Requ	
City & State	City & Stati	e		Election Campaign Financing Trust Fund Contribution		\$5.00 Ma	
Ζφ 3 3 3 3 0 0	Country Zip 5 Broward 29		ountry	8. This corporation has liability for in Florida Statutes	ntangible ta		99.032,
4 53388 25	nd Address of Current Registered Agen	30 <u> </u>		10. Name and Address of New Reg			
	Id Addids of Odilott Flegistered Agen		81 Name	10. 110110 4110 11010 01 11011 1101	Indian wa		
YU, CHESTER	- AID						
208 CAPE POINT			82 Street Add	dress (P.O. Box Number is Not Acceptab	le)		
JUPITER FL 3347	11		83				
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			84 City		FL	95 Zip Co	de
 Pursuant to the provision office or registered ager agent. I am familiar with. 	ns of Sections 607,0502 and 607,1508, Flo nt, or both, in the State of Florida. Such ch , and accept the obligations of, Section 60	orida Statutes, the ange was authoriz 07 0505, Florida St	above-named co red by the corpor tatutes.	rporation submits this statement for the p ation's board of directors. I hereby accep	urpose of characteristics of the appoint	anging its r tment as re	egistered gistered
SIGNATURE							
Signature typi dink	OFFICERS AND DIRECTORS	(NOTE Registe	ered Agent signature req	ADDITIONS/CHANGES TO OFFIC	DATE EDC AND D	DECTORS	N 12
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14. If do 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.

SIGNATURE: