

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 27 AM 8:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000042093 (2)

1. Corporation Name

2D ENTERPRISES, INC.

Principal Place of Business

1501 SAN REMO CR.
HOMESTEAD FL 33035

Mailing Address

1501 SAN REMO CR.
HOMESTEAD FL 33035

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

3a. Date of Last Report

05/31/1994

4. FEI Number

65-04966 53

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

7. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes



Yes



No

2. Principal Place of Business

21

Suite, Apt. #, etc.

2a. Mailing Address

26

Suite, Apt. #, etc.

23 City & State

23

Zip

Country

27 City & State

27

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

DAVIS, ADEANA F
1501 SAN REMO CR.
HOMESTEAD FL 33035

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

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

[Signature]

Signature typed or printed (Current registered agent and the if applicable)

(NOTE: Registered Agent signature required when registering)

4/25/95

DATE

12. OFFICERS AND DIRECTORS

TITLE	DP
NAME	DAVIS, ADEANA F
STREET ADDRESS	1501 SAN REMO CR.
CITY - ST - ZIP	HOMESTEAD FL 33035
TITLE	DST
NAME	DAVIS, KURTISS M
STREET ADDRESS	1501 SAN REMO CR.
CITY - ST - ZIP	HOMESTEAD FL 33035
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 unchanged, as an attachment with an address.

SIGNATURE:

[Signature]

Adeana Davis President

4/25/95

(305) 248-9596

Signature typed or printed (Current registered agent and the if applicable)

Date

Telephone Number