FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 APR 28 AM 10:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000066169 (1)

1. Corporation Name
REGISTRATION PLUS, INC.

Principal Place of Business	Mailing Address
4630 S KIRKMAN RD. 163 ORLANDO FL 32811	4630 S KIRKMAN RD. 163 ORLANDO FL 32811

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business — 21 / 22 Suite, Apt. #, etc. / 23 City & State / 24 Zip / 25 Country
2a. Mailing Address — 26 / 27 Suite, Apt. #, etc. / 28 City & State / 29 Zip / 30 Country

3. Date Incorporated or Qualified: 09/02/1994
3a. Date of Last Report:
4. FEI Number: 59-3279157 — 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 [X] Yes [ ] No

9. Name and Address of Current Registered Agent

ROWLAND, BEATRICE K
5305 BAMBOO CT
ORLANDO FL 32811

10. Name and Address of New Registered Agent

31 Name
32 Street Address (P.O. Box Number is Not Acceptable)
33
34 City FL 35 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

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	ROWLAND, BEATRICE K
STREET ADDRESS	5305 BAMBOO CT
CITY-ST-ZIP	ORLANDO FL 32811
TITLE	D
NAME	MCNICHOL, STEPHEN J
STREET ADDRESS	605 CAMDEN RD
CITY-ST-ZIP	ALTAMONTE SPRINGS FL 32714

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 TITLE	P/D	[X] Change [ ] Addition
1 NAME	ROWLAND, BEATRICE K	
1 STREET ADDRESS	5305 BAMBOO CT	
1 CITY-ST-ZIP	ORLANDO FL 32811	
2 TITLE	V/S/D	[X] Change [ ] Addition
2 NAME	MCNICHOL STEPHEN J	
2 STREET ADDRESS	605 CAMDEN RD	
2 CITY-ST-ZIP	ALTAMONTE SPRINGS FL 32714	

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(1)(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: [signature] STEPHEN J MCNICHOL 24/APR/95 407-425-6327
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0084310 CP