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

Mailing Address 1725 8 NOVA RD.

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 21 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000084639 (1)

## PLUS TWO INCORPORATED

Principal Place of Business

1725 S NOVA RD.

UNIT D7 S. DAYTONA FL 32(19			UNIT D7 S. DAYTONA FL 32119-1748								
US			US				7	3. Date Incorporated or Qualified 11/14/1994 3a. Date of Last Report 04/26/1996			
2. Principa' Place of Business			2a. Mailing Address				,	4. FEI Number		Ar	oplied For
21			26					59-3276434		No	ot Applicable
Suite Apt # etc.			Suite, Apt #, etc.				1	5. Certificate of Status Desired			Additional equired
City & State			City & State				- 1	6. Election Campaign Financing		\$5.00	May Be
23			28					Trust Fund Contribution			to Fees
Zφ	Country		Zip	ip Count			1	8. This corporation has liability fo	r intangible	tax under s	. 199.032,
24	25 29 30			30					W	□ No	
	9. Name and Address of Curre	nt Regis	tered Agent		<u> </u>			0. Name and Address of New F	tegistered /	Agent	
	ZER, ROBERT D				81	Name	ne				
	) S. NOVA RD.				82 Street Address (P.O. Box Number is Not Acceptable)						
SUITE AA05								,			
S. D/	AYTONA FL 32119				83						
					84	City	. <u> </u>		FL	<b>85</b> Zip	Code
	registered agent, or both, in the State im familiar with, and accept the oblig Signification appears to a categorism ag	gations of	ıf, Section 607.0505, Fl	lorida Sta	atutes	S.	sture required w	·	DATE	Oliminera de	
12.	OFFICERS AN			13.	<u>_</u> _			ADDITIONS/CHANGES TO OFF		DIRECTOR	3S IN 12
TOLE	D		DELETE		TITLE					Change	Addition
NAM:	GOORHOUSE, DONALD E			1.21	NAME						
STREET ADDRESS	160 GULL DRIVE			1.3	STREET	T ADDRESS	ss				
CHY-ST-ZiP	DAYTONA BEACH FL 32119				CITY-S						
TH'LE			DELETE		TITLE	· -:		***************************************		Change	Addition
NAME				2.2	NAME						
STREET ADDRESS				2.3	STREET	T ADDRESS	ss				
CHY ST ZIP				2.4	CITY-	ST-ZIP					
TILE			DELETE		TITLE			***************************************		☐ Change	Addition
NAME				3.2	NAME						
STREET ACTORISM				3.3	STREET	T ADDRESS	ss				
COY-S1 ZIP						ST-ZIP					
100		A	DELETE	4.1	TITLE			4.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1		Change	Addition
NAME				4.2	NAME						
STREET ADDRESS				4.3	STREET	I ADDRESS	ss				
SHY-ST-ZIC				4.4	CITY-S	ST-ZiP					
THE			DELETE	5.1	TITLE					Change	Addition
NAME				5.2	NAME						
STREET ALCORESS	<i>:</i>			5.3	STREFT	T ADDRESS	ss				
CHY-51-26				5.4	CITY-S	ST-ZIP					
TILE			DELETE	6.1	FITLE	***************************************		J-100-00-00-00-00-00-00-00-00-00-00-00-00		Change	Addition
NAM?				6.2	NAME						
SERECT ADDRESS				6.3	STREET	T ADDRESS	ss				
CHY-51-74:					CITY-5		_				
14. I do herel	by certify that the information supplie	ed with th	his filing does not qua	alify for th	ie exe	emption	n stated in	Section 119.07(3)(i), Florida Statu	tes. I furthe	r certify that	the
f am an d	ori indicated on this armual report or officer or director of the corporation c in Block 12 or Bluck 13 if changed, (	or the rec	ceiver or trustee empo	wered to	) exec	urate ar cute this	and that my is report as	r signature shall have the same less required by Chapter 607, Florida	gal effect as a Statutes; a	s if made un and that my i	name

GIGNATURE LONAL ESTABLISHED HAME OF STONING OFFICER OF DIRECTOR & GOOR HOUSE 14-15-97 767-454