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FILED
Apr 24 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P95000075034 (5)
1. Corporation Name
ANDERSON TWO, INC



Principal Place of Business: 1875 CEN FLA PK ORLANDO FL 32837
Mailing Address: 1875 CEN FLA PK ORLANDO FL 32837

2. Principal Place of Business: 706 Wallace Ave, Suite, Apt. #, etc. Orlando, FL 32809
26. Mailing Address: Anderson Two Inc, 706 Wallace Ave, Orlando, FL 32809

3. Date Incorporated or Qualified: 08/28/1995
3a. Date of Last Report: 05/01/1996
4. FEI Number: 59-3380619
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes

9. Name and Address of Current Registered Agent: ANDERSON, VK, 3834 CITADEL DR, ORLANDO FL 32821

10. Name and Address of New Registered Agent: Renee Besuden, 706 E Wallace St, Orl., FL 32809

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 607.0805, Florida Statutes.

SIGNATURE: Renee Besuden, President

12. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	ANDERSON, VK	
STREET ADDRESS	3834 CITADEL DR.	VK Anderson
CITY - ST - ZIP	ORLANDO FL 32821	
TITLE	VS	<input checked="" type="checkbox"/> DELETE
NAME	ANDERSON, KEVIN	
STREET ADDRESS	11818 MINTWOOD CT.	
CITY - ST - ZIP	ORLANDO FL 32820	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Renee Besuden	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	President	
1.3 STREET ADDRESS	706 Wallace Ave	
1.4 CITY - ST - ZIP	Orlando, FL 32809	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 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: Renee Besuden, 2/12/97 407-851-6001

CR2E034 (9/96)