


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

FILED

May 06 1997 8:00am  
Secretary of State

<b>PROFIT CORPORATION ANNUAL REPORT 1997</b>				<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # P95000082789</b> 1. Corporation Name <b>DIVISION 10 PLUS CORP</b>					
Principal Place of Business			Mailing Address		
<b>1020 NW 6th St, Bldg H&amp;I Deerfield Beach, FL 33442</b>			<b>1020 NW 6th St, Bldg H&amp;I Deerfield Beach, FL 33442</b>		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		<b>10/25/95</b>	
22 City & State		27 City & State		3a. Date of Last Report	
23 Zip		28 Zip		<b>65-0622645</b>	
24 Country		29 Country		4. FEI Number <b>65-0622645</b>	
25		30		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
<b>STEPHEN M. GOODMAN</b>  <b>1020 NW 6th St, Bldg H&amp;I Deerfield Beach, FL 33442</b>			81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City <b>FL</b> 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 obligation of, Section 607.0505, Florida Statutes.					
SIGNATURE <i>Stephen M. Goodman</i>			Stephen M. Goodman <b>4/30/97</b>		
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE <b>D</b> NAME <b>STEPHEN COLANGELO</b> <input type="checkbox"/> DELETE STREET ADDRESS <b>1020 NW 6th St, Bldg H&amp;I</b> CITY-ST-ZIP <b>Deerfield Beach, FL 33442</b>			1.1 TITLE <b>DP</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		
TITLE <b>D</b> NAME <b>LYNN TAILMAN</b> <input checked="" type="checkbox"/> DELETE STREET ADDRESS <b>1020 NW 6th St, Bldg H&amp;I</b> CITY-ST-ZIP <b>Deerfield Beach, FL 33442</b>			2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		
TITLE <b>D</b> NAME <b>VINCENT COLANGELO</b> <input checked="" type="checkbox"/> DELETE STREET ADDRESS <b>1020 NW 6th St, Bldg H&amp;I</b> CITY-ST-ZIP <b>Deerfield Beach, FL 33442</b>			3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP		
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP			4.1 TITLE <b>ST</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 4.2 NAME <b>JOY MANCUBO</b> 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP <b>1020 NW 6th St, Bldg H&amp;I Deerfield Beach, FL 33442</b>		
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS 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		
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS 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 on Block 12 or Block 13 if changed, or on an attachment with an address.					
SIGNATURE: <i>Stephen Colangelo</i>			<b>700002178737</b> <b>-05/14/97--01102--031</b> <b>***165.00</b>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			<b>4/30/97 1-800-984-2660</b> Stephen Colangelo Daytime Phone #		

CR2E034 (9/96)