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

PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P96000030246 (8)

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JUST TWO, INC.

Country

g. Name and Address of Current Registered Agent

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SOUTH DAYTONA FL 32119

YATES, JEFF A 1749 JACOBS ROAD Mading Address

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

Principal Place of Business 1749 JACOBS ROAD **SOUTH DAYTONA FL 32119**

2, Principal Place of Business

Suite, Apt. #, etc.

City & State

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Zip

1749 JACOBS ROAD SOUTH DAYTONA FL 32119

FILED May 04 1998 8:00am Secretary of State



Personal Property Tax due June 30.

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

Name and Address of New Registered Agent

84 City 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

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Country

Name

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SIGNATURE	Signatura, typed or printed name of registered agent and title it	apple thic (NOI	F: Registered Agent signature requir	red when reinstating)	DATE		
12.	OFFICERS AND DIRECT		13.		ES TO OFFICERS AND DIRE	CTOR	S IN 12
TITLE	D	DELETE	1.1 TITLE		☐ Cr	ange	Additio
NAME	YATES, JEFF A		1.2 NAME				
Treet address	1749 JACOBS ROAD		1.3 STREET ADDRESS				
NTY-ST-ZIP	SOUTH DAYTONA FL 32119		1.4 CiTY - ST - ZiP				
ITLE	D	DELETE	2.1 TITLE		☐ Cr	ange	Additio
IAME	YATES, ANN E		2.2 NAME				
TREET ADDRESS	1749 JACOBS ROAD		2.3 STREET ADDRESS				
ITY-ST-ZIP	SOUTH DAYTONA FL 32119		2. 4 CiTY - ST - ZIP				
TLE		DELETE	3.1 TITLE		CI	ange	Additio
AME			3.2 NAME				
TREET ADDRESS			3.3 STREET ADDRESS				
TY+ST-ZIP			3 4. CITY - ST - ZIP				
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IAME			4. 2 NAME.				
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ITLE		☐ DELETE	51 TIFLE		☐ CI	ange	Additio
IAME			5.2 NAME				
TREET ADDRESS			5 3 STREET ADDRESS				
ITY-ST-ZIP			54 CITY-ST-ZIP				
ITLE		DELETE	61 TITLE		CI	ange	Additio
IAME			62 NAME				
TREET ADDRESS			63 STREET ADDRESS				
MY_67_7IP			6.4 CITY-ST-7IP				

14. 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 changes, or on an attachment with an address.