

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000067661

FILED
Jan 09, 2004
Secretary of State

Entity Name: INSITE PLUS II, INC.

Current Principal Place of Business:

5703 COCO PLUM DR.
PH 1
TAMARAC, FL 33319

New Principal Place of Business:

Current Mailing Address:

5703 COCO PLUM DR.
PH 1
TAMARAC, FL 33319

New Mailing Address:

5703 COCO PALM DR.
PH 1
TAMARAC, FL 33319

FEI Number: 65-0779692

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POMERANCE, ROGER M
1900 CORPORATE BLVD., N.W.
SUITE 201E EAST BLDG.
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: GILCHICK, LINDA
Address: 5703 COCO PLUM DR.
City-St-Zip: TAMARAC, FL 33319

Title: VS () Delete
Name: GILCHICK, STACEY
Address: 101 W 57TH ST, APT 15G
City-St-Zip: NEW YORK, NY 10019

Title: VT () Delete
Name: GILCHICK, ROBERT A
Address: 4078 CHAMOUNE AVE #5
City-St-Zip: SAN DIEGO, CA 921051826

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: GILCHICK, LINDA
Address: 5703 COCO PALM DR.
City-St-Zip: TAMARAC, FL 33319

Title: VS (X) Change () Addition
Name: GILCHICK, STACEY R
Address: 180 OLD ALBANY POST ROAD
City-St-Zip: GARRISON, NY 10524

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LINDA GILCHICK

PRES

01/09/2004

Electronic Signature of Signing Officer or Director

Date