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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000010492

POWERFUL LEARNING 2, INC.

e of Business	Mailing Address						
5121 EHRLICH ROAD 5121 EHRLICH ROAD							
					DO NOT WRITE IN THIS SPACE		
24	TAMPA FL 33624						
	2a Mailing Address	_				1 1	Applied For
lace of Business	⊢ •		_				Not Applicable
# oto						\$8.7	5 Additional
#, etc.	⊢ '''				5. Certifcate of Status Desired	¥ - · · ·	Required
	4.00	_			6 Florties Compaign Financing	\$5.0	0 May Be
							ed to Fees
Country							
	— — — — — — — — — — — — — — — — — — —					Yes	₩No
		1201	T			istered Agent	
3. Name and Positors 5. State		_	81	Name			•
SSANDRI, PETER				0	(S.O. B. Marker in Net Acceptable		
5121 EHRLICH ROAD SUITE 106-B TAMPA FL 33624			82	Street Addr	ess (P.O. Box Number is Not Acceptable		
			83	-111		•	
			84	City		FI 85 Z	ip Code
to the provisions of Sections 607 050	2 and 607 1508 Florida Statu	tes the a	hove	-named corp	pration submits this statement for the pur	roose of changing	its registered
edistered agent or both in the State.	of Florida. Such change was a	autnorize	a by i	tne corporatio	n's board of directors. I hereby accept the	ne appointment as	registered
·							
				t signature require			TODE IN 12
					ADDITIONS/CHANGES TO OFFIC		
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TAMPA FL 33624				r-ZIP			ge Addition
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		2.3 S	TREET	ADDRESS			ſ
							_ [
			CITY-S	T-ZIP			Addition
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	Country 25 9. Name and Address of Currer SSANDRI, PETER EHRLICH ROAD E 106-B PA FL 33624 to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the obliga	SANDRI, PETER EHRLICH ROAD E106-B PA FL 33624 Country 25 9. Name and Address of Current Registered Agent SSANDRI, PETER EHRLICH ROAD E 106-B PA FL 33624 Cotty & State 28 Country 29 9. Name and Address of Current Registered Agent Country Cotty & State 28 Country 29 9. Name and Address of Current Registered Agent Country Cotty & State 28 Country 29 9. Name and Address of Current Registered Agent Cotte provisions of Sections 607.0502 and 607.1508, Florida Status 29 29 29 10 29 10 10 10 10 10 10 10 10 10 1	SANDRI, PETER EHRLICH ROAD E106-B PA FL 33624 Country Zip SANDRI, PETER EHRLICH ROAD E 106-B PA FL 33624 Country Country Country Country Zip Countr	SCAND SIZE EHRLICH ROAD SUITE 106-8 TAMPA FL 33624 ace of Business 2a. Mailling Address 2b. Suite, Apt. #, etc. 27 2a. City & State 28 Country 25 29 30 9. Name and Address of Current Registered Agent SSANDRI, PETER EHRLICH ROAD E 106-B PA FL 33624 84 85 86 87 88 88 89 89 80 80 80 80 80 80	SANDRI, PETER EHRLICH ROAD E 106-B PA FL 33624 Suite, Apt. #, etc. Country Zip Country Zip Country Zip Country Zip Country SSANDRI, PETER EHRLICH ROAD E 106-B PA FL 33624 Signature, typed or printed name of registered agent and title if applicable. OFFICERS AND DIRECTORS D ALESSANDRI, PETER 1.3 STREET ADDRESS TAMPA FL 33624 SITE IN AME 1.3 STREET ADDRESS TAMPA FL 33624 Suite, Apt. #, etc. Country Zip Country Zip Country Zip Country Zip Country Signature, Apt. #, etc. 28 Country Zip Country 30 Signature, Street Address Signature, Typed or printed name of registered agent and title if applicable. OFFICERS AND DIRECTORS 13. D ALESSANDRI, PETER 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP DELETE 2.1 TITLE	TAMPA FL 33624 SUITE 106-8 TAMPA FL 33824 TO NOT WRITE 3. Date Incorporated or Qualifed 02/02/1998 4. FEI Number - 59 3 490 77 8 5. Certificate of Status Desired Trust Fund Contribution Country Zip Country Zip Country Zip Country Zip Country Trust Fund Contribution owes the current Personal Property Tax. 9. Name and Address of Current Registered Agent Tham Part Address (P.O. Box Number is Not Acceptable 82 Street Address (P.O. Box Number is Not Acceptable 83 SANDRI, PETER EHRLICH ROAD E 106-B PA FL 33624 To the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the put agistered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable. OFFICERS AND DIRECTORS D D DELETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS TAMPA FL 33624 D DELETE 2.1 TITLE	AND SUITE 106-8 TAMPA FL 3824 TAMPA FL 3824 3. Date Incorporated or Qualified 02/02/1998 ace of Business 2a. Mailing Address 2b

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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, with all other like empowered.

SIGNATURE:

STREET ADDRESS

FILED

Mar 25, 1999 8:00 am Secretary of State

03-25-1999 90048 003 ***150.00