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

PROFUT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B, Mortham

Secretary of State *
DIVISION OF CORPORATIONS

1997

DOCUMENT # F95000004156 (4)

TRAMMELL CROW CORPORATE SERVICES, INC.

Principal Pla	ro of Business	Mailing Address								
Principal Place of Business 695 EAST MAIN STREET, SUITE 405 STAMFORD CT 06901		2001 ROSS AVENUE SUITE 3500 DALLAS TX 75201-2998						7 4 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
		U\$				3. Date Incorporated or Qualified 08/29/1995	1	e of Last Ri 0/1996	eport	
· ·	Place of Business	2a. Mailing Address				4. FEI Number			oplied For	
21 Suite, Apt	h H ato	26				75-2378868			ot Applicable	
22 Suite, Apr	t #, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 A		
City & Sta	ale .	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Z ip	Country	28	Count	lrv		Trust Fund Contribution	LI			
24	25		30	.,		8. This corporation has liability for in Florida Statutes		ax unger s. No	. 199.032,	
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent					
THE PRENTICE-HALL CORPORATION SYSTEM, INC.				81 Name NOW KNOW A A S Corporation Service Company						
1201 HAYS STREET				2 Street	Addres	s (P.O. Box Number is Not Acceptable	y e)		——————————————————————————————————————	
2ND FLOOR TALLAHASSEE FL 32301			8	3						
INLENTINOSEE TE OZOUT										
	•			4 City			FL	1 1	Code	
11. Pursuan office or	t to the provisions of Sections 607.0502 rigistered agent for both fin the State of an familiar rath point accept the obline	Land 607, 1508, Florida Statutes of Florida, Such change was au	s, the abo	ve-named	corpora	ation submits this statement for the pr	irpose of c	hanging it	s registered	
agenty	an familiar with Arist accept the oblide	ons of Section 607.0505, Flor	ida Statut	es.	JOI DE LIGHT	To bould of dilectors, (Horeby Book)	t trie appor	TIUTIOTIL CLS	registered	
SIGNATURE	Signature Typico or printed name of rejudiced agen	Amy	y Bas	s, Ass	t. S	Secretary Feb when reinstating)	ruary	7, 19	97	
12.	OFFICERS AND		13.	Agent signature	radolian i	ADDITIONS/CHANGES TO OFFICE	ERS AND I	DIRECTOR	S IN 12	
THTLE	T	DELETE	1.\$ TITLE		'n	/v.		Change	Addition	
NAME	DEGROAT, SEAN E	Γ	1.2 NAM	E	1	yan, William F.	1	1		
STREET ADDRESS		1.3		1.3 STREET ADDRESS		95 East Main St., #4	105			
CITY - ST - ZIP			1.4 CITY		S	tamfor d, CT 06901				
TITLE	DV ANADA ACIAVA	☐ DELETE	2.1 TITLE				L.	Change	Addition	
NAME STREET ADDRESS	NAKAHARA, ASUKA 2001 ROSS AVE., SUITE 3500		2.2 NAME 2.3 STREET ADDRESS							
CITY ST-ZIE	DALLAS TX		1	-ST-ZIP					1	
1)1LE	8	DELETE	3.1 TITLE		S		N	Change	Addition	
NAME	OAKS, DEBROAH A	1	32 NAM		S	avino, Rebecca M.	7	· ·		
STREET ADDRESS		•	33 STRE	ET ADDRESS	2	001 Ross Ave., #3500)			
CITY - S1 - Z(P	DALLAS TX		3.4. C/TY	-ST-ZIP	D.	allas, TX 75201				
DILE	DV	☐ DELETE	4.1 TITLE	Ī			Ţ	Change	Addition	
NAME	LIPPE, GEORGE L		4 2 NAM	i						
STREET ADDRESS	2001 ROSS AVE., SUTIE 3500 DALLAS TX		1	ET ADDRESS		•				
CHTY+ST+7IP THEE	V	☐ DELETE	4.4 City 51 Title			<u> </u>		Change	Addition	
NAME	WILLIAMS, J M	ter at at to a	5.2 NAM					_ vilongo	radifici)	
STREET ADDRESS	0004 0000 NE OFF 0F00		1	ET ADDRESS						
CHY-SI-Z-P	DALLAS TX	_	5.4 CITY					,		
1.71.5	V	DELETE	61 TITLE			/D		Change	Addition	
NAME	MCKINZEY, LAURIE A	\	6.2 NAM	E	Ne	akahara, Asuka		12		
STREET ADDRESS	303 W MADISON STE 1350	1	63 STRE	et address	20	001 Ross Avenue, Sui	te 35	00		
OUTU OF THE	1 .TH .A(4) 1 H				· •					

CHICAGO IL

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 suppliemental 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 2 of Block 3 if changed, or on an attachment with an address.

SIGNATURE

CACON I PRINTED NAME OF STONING OFFICER OF ORDERTOR

1-7-97

(214) 863-3080

Daytime Phono #

FILED

Feb 18 1997 8:00am

Secretary of State