

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000115985

FILED
Nov 09, 2004
Secretary of State

Entity Name: PROFIT PROPERTY CORP.

Current Principal Place of Business:

3370 NE 190 ST #303
AVENTURA, FL 33180

New Principal Place of Business:

3201 E. COUNTRY CLUB DR.
2201
AVENTURA, FL 33160

Current Mailing Address:

3370 NE 190 ST #303
AVENTURA, FL 33180

New Mailing Address:

19501 E. COUNTRY CLUB DR.
9-101
AVENTURA, FL 33180

FEI Number: 83-0373146

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SERBER, DANIEL J ESQ.
SERBER & ASSOCIATE, P.A.
2875 NE 191 ST STE 801
AVENTURA, FL 33180 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ALTAMIRANO, ARTURO
Address: 3370 NE 190 ST #303
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: MONICA TORRES

VP

11/09/2004

_____ Electronic Signature of Signing Officer or Director

_____ Date