

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000115985

FILED  
May 15, 2008  
Secretary of State

Entity Name: PROFIT PROPERTY CORP.

**Current Principal Place of Business:**

3201 NE 183RD ST.  
2201  
AVENTURA, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

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

**New Mailing Address:**

3201 NE 183RD ST.  
2201  
AVENTURA, FL 33160

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 (X).

**OFFICERS AND DIRECTORS:**

Title: D (X) Delete  
Name: ALTAMIRANO, ARTURO  
Address: 19501 E COUNTRY CLUB DR. APT. 101  
City-St-Zip: AVENTURA, FL 33180

Title: D ( ) Delete  
Name: TORRES, MONICA  
Address: 19501 E COUNTRY CLUB DR. APT. 101  
City-St-Zip: AVENTURA, FL 33180

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: D (X) Change ( ) Addition  
Name: TORRES, MONICA  
Address: 3201NE 183RD STREET  
City-St-Zip: AVENTURA, FL 33160

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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

DIRE

05/15/2008

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date