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PROFIL CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1996

P95000075325 (7)

SWANNY & SONS ENTERPRISES, INC.

| Principal Place of Business Mailing Address | | | | | | | | | | | | | | |
|--|-----------------|------------------|---------------------------------|-----------------------------|---------------------------|--------------------|-------------------|----------|----------------|--|-------------------------------|---------------------------------|-------------------------------|--|
| 11750 S.W. 185TH STREET | | | | | 11750 S.W. 185TH STREET | | | | | | | | | |
| SOUTH MIAMI FL 33177-3263 | | | | | SOUTH MIAMI FL 33177-3263 | | | | | | | | | |
| | | | | | | | | | | 3. Date Incorporated or Qualified 3a. Date of Last Report 09/18/1995 | | | | |
| 2. 21 |] | | | 2a. Mailing 26 | a. Mailing Address | | | | | 4. FEI Number 65-06202 | 870 | h | Applied For Not Applicable | |
| 22 | | | | Suite, . 27 | Suite, Apt. #. etc. | | | | | 5. Certificate of Status Desire | d [] | \$8.75 Additional Fee Required | | |
| 23 | City & State 28 | | | 1 | City & State | | | | | 6. Election Campaign Financi Trust Fund Contribution | ng 🗀 | | O May Be d to Fees | |
| 24 | Zip | 25 | | | | Country 30 | | | - | 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes | | | | |
| <u> </u> | | 9. Name | and Address of Cur | rent Registered A | gent | | | | | 10. Name and Address of N | ew Registered | Agent | | |
| | | | | | | | 81 | Nan | ne | | | | | |
| WOLLAND, FRANK 11601 BISCAYNE BLVD #301 | | | | | | | 82 Street Address | | | ss (P.O. Box Number is Not Acc | aptable) | · | | |
| | | MIAMI FL | | | | | 83 | | | | | | | |
| | | | | | | | 84 | City | , | | | 85 Zip | o Code | |
| 11 | Purcuent t | a the provies | one of Sections 607 O | 00 and 607 1500 | ficial Out A | | Ш | | | | FL | _ ' ' | | |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | | | | | | | | ianging its r s registered | egistered office aoent. I am | | |
| | TOTAL SALE | m, and accep | pt the obligations of, S | ection 607.0505, Fi | orida Statutes. | | | | | | 11 | | | |
| 811 | GNATURE _ | Signature, typed | or printed name of registered a | ent and title it applicable | | E: Registered | Agent | t sionah | ure recuered w | when reinstating) | DATE | | | |
| 12 | | | OFFICERS. | AND DIRECTORS | | | | | | ADDITIONS/CHANGES TO | | D DIRECTO | RS IN 12 | |
| TIT | | PTD | |] |) DELETE | 1 1 T | IILE | | | | | ☐ Change | Addition | |
| | | | NEPOEL, MICHAEL | | 12 N | | NAME | | | | | | | |
| STREET ADDRESS 11750 S.W. 185TH STREET CITY-ST-ZIP SOUTH MIAMI FL 33177-32 | | | | | | | ADDRE: | SS | | | | | | |
| TIT | | VSD | MIAMI FL 33177- | | DELETE | 1.4 CI | | 1-716 | | | | | | |
| NAI | | | JEDOEL VANAAL | L |] becci | 2 1 11 | | | | | | Change | ☐ Addition | |
| STREET ADDRESS SWAENEPOEL, VIVIAN 11750 S.W. 185TH STREET | | | :T | 2 / N | | | a furbaci | | | | | | | |
| CITY-ST-26 SOUTH MIAMI FL 33177-3263 | | | • | | | | ADDRES | 55 | | | | | | |
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| STA | eft address | | | | | | | ADDRE | ss | | | | | |
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| | EET ADDRESS | | | | | 4351 | REET A | ADDRES | SS | | | | , | |
| TITL | r-ST-ZiP | | | | T DECEM | 4.4 Cl | ********* | - ZIP | | | | | | |
| NAN | | | | L. |] DEFEIF | 5 1 1 | | | | | | Change | Addition | |
| | EET ADDRESS | | | | | 5.2 NA | | ADDOC: | ,, | | | | | |
| | r-ST-ZIP | | | | | | | ADDRES | » | | | | | |
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| NAN | ME | | | _ | | 6.2 NA | | | | 10001: -06/07/960 ***200.00 | 010220 | D4 **** | LI AUGUSTI | |
| STR | EET ADDRESS | | | | | | | ADDRES | ss | ***200.00 | | | ?/, ¹ | |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 12 if changed, or on an attachment with an address.

SIGNATURE: