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

PRÓFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P9400070939 (1)

QUEST INTERNATIONAL, INC.

FILED Apr 23 1998 8:00am Secretary of State

					300 0 0000 1000 1100 160 180
Principal Place of Business Mailing Address			I HOUIFOU IIO IRIII BIBII BOIII BRILI BUIII	10011 00110 10100 1111£ 1611 1801	
1938 NE 148 TERR **17084 WEGT DIXIE HIC		-17004 WEST DIXIE HIGHW	'AY		
NO MIAMI FL 33181 <u>N. MIAMI BEACH FL-</u> US		N_MIAMI-BEAGH FL-93160		DO NOT WRITE IN THIS SPACE	
1 00				3. Date incorporated or Qualified	10 81 702
				09/27/1994	
2. Principal Place of Business 2a. Mailing Address		2a. Mailing Address	10B1.	4. FSI Number	Applied For
21 26			e 19th Ave	65-0522334	Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State	4	Election Campaign Financing	Fee Required
23		28 No. MIAMI	BRACH FL	Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25		30 USA	Personal Property Tax due June 30.	Yes 🗌 No
				10. Name and Address of New Registers	d Agent
TROY, SANDRA 81 Name TROY SAVARA					
17004 WEST DIVIE HIGHWAY 82 Street Address				ess (P.0. Box Number is Not Acceptable)	_
NC	PRTH MIAMI BEACH FL 33160		B3 /	738 NE 118 16	·K
1			<u> </u>		
,			84 City	MIAMI F	85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes	s, the above-hamed corp	oration submits this statement for the purpose	e of changing its registered
office 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 as registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.					
SIGNATURE					
Signature, typed or printed name of registered agent and title if applicable (NOTE Ri			Registered Agent signature require		
12.	OFFICERS AND	D DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	CORT, ROBERT A		1.2 NAME		CT CHRUBE CT MOR(101)
STREET ADDRESS	2453 N. 37TH AVE.		1.3 STREET ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL 33027		1.4 CITY - ST - ZIP		
TITLE	V	DELETE	2.1 THILE		Change Addition
NAME	KIEFER, DAVID J		2.2 NAME		
STREET ADDRESS	828 LAKE DRIVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI SPRINGS FL 33166		2 4 CITY-ST-ZIP		
TITLE	\$	□ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	TROY, SANDRA		3.2 NAME		
STREET ADDRESS	2320 N.E. 215TH ST.		3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	NORTH MIAMI FL 33180	DELETE	3.4. CITY-ST-ZIP		Change Addition
NAME	COMPAIN, OSCAR	בַן טנננונ	4.1 T(TLE		Change Changion
STREET ADDRESS	6861 SW 95 AVE		4. 2 NAME 4.3 STREET ADDRESS		
City-St-ZiP	MIAMI FL		4.4 City-ST-ZiP		
TITLE	tela titl 1 C	DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		<u>-</u>
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST- ZIP		
TITLE		☐ DEL e te	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-SY-ZIP	north, that the information concluded wi	ih this filing does not musik, for	64 CITY-ST-ZIP	Castian 140 07(2)(i) Florida Ctatuta I further	

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.

IGNATURE: Kale & Col & Robert Cont Apply 3 199