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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DE TIMENT OF STATE

Secretary of State

DOCUMENT # 476006 1. Corporation Name

PROJECT ADVISERS CORP.

e Harris DIVISION OF CORPORATIONS

FILED 00 MAY 10 AM 9: 12

SEGNETARY OF STATE TALLAHASSEE, FLORIDA



7425 SW 42NE	e of Business	Malling Address			1			
7425 SW 42ND STREET		7425 SW 42ND STREET						
MIAMI FL 3315	55	MIAMI FL 33155						
						DO NOT WRITE IN	THIS SPACE	
					3. Date Incorpora	ted or Qualifed		
					05/09/1975			
2 Principal F	lace of Business	2a. Mailing Address	··		4. FEI Number		Ι [Δ	pplied For
- 1		——————————————————————————————————————		59-1699264	1		ot Applicable	
11		26			33 103320			
Suite, Apt. #, etc.		Suite, Apt. #, etc.	-		5. Certificate of St	atus Desired		Additional
2		27	·!				Fee R	equired
City & Stat	9	City & State			6. Election Camp	aign Financing 👝	\$5.00	May Be
3		28			, Trust Fund Cor	ntribution		to Fees
Zip	Country	Zip	Country	,	8. This corporation	n owes the current y	ear intangible	
- ; '	[25]	29	30	7	Personal Prope		☐ Yes	□No
4	9. Name and Address of Curren		1301			dress of New Regis		
	3. Name and Address of Curren	iit Registered Agent	81	Name	- \ \ .			
EST	EVEZ, MICHEAL		181	Manie	*	LUACES	JOAQUI	Ŋ
			82	Street Ar	idress (P.O. Box Numbe		7.401	
	5 SW 42ND ST			742				
MIA	MI FL 33155		83	-2 -1 -2		- 1		
		•	L					
			84	City		-	85 Zip	Code
~. ~~				<u> - M</u>	1 MM 1=			3155
11. Pursuant	to the provisions of Sections 607.050	02 and 607 1508, Florida Statut	es, the above	e-named co	progration submits this st	atement for the purp	ose of changing its	s registered
office of r	egistered agent or both, in the State m familiar with, and accept the obliga	i of Florida. Such change was a atlans of Section 607 0505. Fin	uinonzeo oy rida Statutes	tne corpora	ation's board of directors	. I nereby accept the	арроілипен аз ге	agistereu
agosti. ra	The state of the s	andria (ii, 566ma), (61 .5560), i io	TIGE CICIEICS	•		SISIO	۸.	
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	Signature, typed of printed name of registered age			nt signature requ	ured when reinstating)	ANGES TO DESICE	RS AND DIRECTO	ORS IN 12
12.	OFFICERS AN	ND DIRECTORS	13.		ADDITIONS/CH.	ANGES TO OFFICE		
	OFFICERS AN			12	ADDITIONS/CH.		RS AND DIRECTO	ORS IN 12 ☐ Addition
12.	OFFICERS AN MURPHY, LINDA F	ND DIRECTORS	13.	19	ADDITIONS/CH.	OA F.		
12. ITLĒ	OFFICERS AN	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME	19	ADDITIONS/CH.	OA F.		
12. TITLE AND	OFFICERS AN MURPHY, LINDA F	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET	TADORESS	ADDITIONS/CH	OA F.		
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14. 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 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 true empowered to execute wis 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 a state of the corporation.

SIGNATURE:

YPED OR PRINTED NAME OF SIGNAS OFFICER OF SIRECTOR