

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 28, 2008 08:00 AM
Secretary of State**

DOCUMENT # 594767

1. Entity Name
PROGRESSIVE BUSINESS INC.



Principal Place of Business

**4190 S UNIVERSITY DR
#B
DAVE, FL 33328 US**

Mailing Address

**4190 S UNIVERSITY DR
#B
DAVE, FL 33328 US**

DO NOT WRITE IN THIS SPACE



01252008 No Chg-P CR2E034 (11/05)

4. FEI Number
59-1916776

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**JATOFT, MICHAEL T.
11861 TARA DR
PLANTATION ACRES, FL 33325**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JATOFT, MICHAEL T. 11861 TARA DR PLANTATION ACRES, FL 33325
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD JATOFT, ANNE E. 11861 TARA DR PLANTATION ACRES, FL 33325
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000800193
01/31/08-80007-018 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed; or on an attachment with an address, with all other like empowered.

SIGNATURE _____

Michael J. Jatoft, Corporate Secretary 954-370-7778
Ext. 228