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

PRÖFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

T. Corporation	NIEN 1 # F3/5/6 RATING AND PACKING, INC	•			
DEST CI	nating and facking, inc	,			
Principal Place	e of Business	Mailing Address		T SERVER VERN VERN VERN VERN VERN VERN VERN	(BIBIT B1811 B1811 B1817 B1811 1981
7752 NW 64 ST 3240 SW 95TH COURT MIAMI FL 33166 MIAMI FL 33165 US				DO NOT WRITE IN TH	IIS SPACE
				3. Date Incorporated or Qualifed 06/15/1981	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number 59-2112609	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	е .	City & State	a	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year	Intangible
24	25	29	30	Personal Property Tax.	
	9. Name and Address of Current	t Registered Agent	81 Name	10. Name and Address of New Registere	a Agent
	AIN VILLA			ress (P.O. Box Number is Not Acceptable)	
3270 011 90 01					1 1 2 2 2 2 2 2 2
MIA	MI FL 33165		83		
			84 City	F	85 Zip Code
agent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	2 and 607.1508, Florida Statu of Florida. Such change was ions of, Section 607.0505, Fl	ites, the above-named corp authorized by the corporati orida Statutes.	poration submits this statement for the purpose on's board of directors. I hereby accept the app	of changing its registered pointment as registered
SIGNATURE	Signature, typed or printed name of registered agent	t and title if applicable. (NOT	E: Registered Agent signature require	ed when reinstating) ; co DATE	
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	VDS .	· DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	VILLA, ADELAIDA		1.2 NAME	•	
STREET ADDRESS	3240 SOUTHWEST 95TH CT	•	1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FLORIDA 0		1.4 CITY-ST-ZIP		
TITLE	PD	☐ DELETE	2.1 TITLE		Change Addition
NAME	VILLA, EFRAIN		2.2 NAME	,	
STREET ADDRESS	3240 SOUTHWEST 95TH CT		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FLORIDA 0 27 2.7/42		2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLÉ		☐ Change ☐ Addition
NAME .			3.2 NAME		
STREET ADDRESS	李代·美国、		3.3 STREET ADDRESS		
CITY-ST-ZIP		☐ DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		☐ Change → ☐ Addition
TITLE		_ belefic			C ollerân i v C i recursi.
NAME ATTREET APPRESS			4. 2 NAME 4.3 STREET ADDRESS		
STREET ADDRESS	£``				
CITY-ST-ZIP	-	☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	•	☐ Change ☐ Addition
TITLE	1.	_ 021111	5.2 NAME	$\mathfrak{S}_{\mathbb{R}}$	
NAME STORET ADORESS	•		5.3 STREET ADDRESS		
STREET ADDRESS	greg		5.4 CITY-ST-ZIP	·	
CITY-ST-ZIP TITLE	Mark Carlot Control	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
······	Colors of the second	_ 522212	62 NAME		

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 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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

1/7/98

305-599-8007

FILED

Jan 22, 1999 8:00am

Secretary of State

01-22-1999 90085 050 ***150.00

CR2E034 (11/98)