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PROFIT ©ORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F92126

PROFESSIONAL SUCCESS UNLIMITED, INC.								
Principal Place	e of Business	Mailing Addre					H II I III II	B))
7777 131ST STREET NORTH 7777 131ST STREET NORTH								
SUITE 15 SUITE 15						DO NOT WRITE IN THIS SPA	ACE	
SEMINOLE FL 33776 US SEMINOLE FL 33776 US						3. Date Incorporated or Qualifed		
03		03				07/27/1982		
2. Principal P	lace of Business	2a, Mailing Ad	Idress			4. FEI Number	App	lied For
21		26				59-2207684	Not	Applicable
Suite, Apt.	#, etc.	Suite, Apt.	#, etc.				8.75 A	
22		27				- 5. Certificate of Status Desired	Fee Rec	uired
City & Stat	e	City & Sta	City & State			6. Election Campaign Financing \$5.00 May Be		
23		28				Trust Fund Contribution Added to Fees		
Zip ├──	Country	Zip	<u></u>	Country		8. This corporation owes the current year Intangil		□No
24	25 Anna and Address of Curren	29	30	I		Personal Property Tax. 10, Name and Address of New Registered Age		
Name and Address of Current Registered Agent					Name	10. Haille dita Addiese of feet Togotelea Age		
FERNANDEZ, PETER G								
777 131ST STREET NORTH				82	Street Ac	get Address (P.O. Box Number is Not Acceptable)		
SUITE 12 15				83				
SEM	INOLE FL 33776			84	0:4	8:	5 Zip C	ode
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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 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 age	int and title if applicable.	(NOTE: Rec	gistered Agen	t signature requ	uired when reinstating) DATE		
12.		ND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND D		
TITLE	PTD	Ц	DELETE	1,1 TITLE	1	U	Change	Addition
NAME	FERNANDEZ, PETER G			1.2 NAME	}	· ·		4
STREET ADDRESS	7777 131ST STREET STE 12 /	5		1,3 STREET				
CITY-ST-ZIP	SEMINOLE FL		DELETE	1.4 CITY-S	T-ZIP		Change	Addition
TITLE	AS CARRONNEAU MALERIE		DELETE	2.1 TITLE			Onlingo	
NAME	THE ANALY STREET HORTH STE AND A			2.2 NAME 2.3 STREET ADDRESS				,
STREET ADDRESS				2.4 CITY-ST-ZIP				
CITY-ST-ZIP TITLE	OCHINIOCE I E		DELETE	31 TITLE	1-21	. 0	Change	Addition
NAME		_		3.2 NAME	1			
STREET ADDRESS				3.3 STREET	ADDRESS			,
City-ST-ZIP				3.4. CITY-S	1			
TITLE			DELETE	4 1 TITLE			Change	Addition
NAME				4. 2 NAME				ŀ
STREET ADDRESS				4.3 STREET	FADDRESS			}
CITY-ST-ZIP				4.4 CITY-S	T- ZIP			
TITLE			DELETE	5.1 TITLE	1		Change	Addition
NAME				5.2 NAME				
STREET ADDRESS				5.3 STREET		·		
CITY-ST-ZIP			DELETE	5.4 CITY-S' 6.1 TITLE	1^217		Change	Addition
TITLE		, L	JUELETE	6.2 NAME		·	i Suringe	L.,
NAMIC				6.3 STREET	CADDRESS			
STREET ADDRESS	1			J.O O HALE				

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 a statement with an other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

ARBONNEAU