FILENOW: FILING FEE AFTER MAY 1 IS \$550.00

PRÓFIT CORPORATION **ANNUAL REPORT** 1997

NAME

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

FILED

May 16 1997 8:00am

Secretary of State

(606) 572-8743

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F93000001484 (5) **GENCA CORPORATION** Principal Place of Business Mailing Address G/O GENCA CORP. 4850 ÚLMÉRTON RO CLEARWATER FL 34622 C/O GENERAL CABLE CORP. 4 TESSENEER DR. HIGHLAND HEIGHTS KY 41076-9753 3. Date Incorporated or Qualified 3a. Date of Last Report 03/25/1993 05/01/1996 2a. Mailing Address 2. Principal Place of Business 4. FFI Number Applied For 21 22-2885883 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 Florida Statutes Yes No 30 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTÁTION FL 33324 83 City 84 Zip Code 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 of statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 96 60 DELETE TITLE 1.1 TiTLE ☐ Change MORGENTHALER, ALLEN C NAME 1.2 NAME **4850 ULMERTON ROAD** STREET ADDRESS 1.3 STREET ADDRESS **CLEARWATER FL 34622** CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE Change 2.1 DILE Addition NAME WHELAN, JEFFREY J 2.2 NAME STREET ADDRESS 4 TESSENEER DRIVE 2.3 STREET ADDRESS CITY-ST-ZIP HIGHLAND HEIGHTS KY 41076 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change Addition NAME SIVERD, ROBERT J 3.2 NAME STREET ADDRESS 4 TESSENEER DRIVE 3.3 STREET ADDRESS HIGHLAND HEIGHTS KY 41076 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition CHRISTOPHER F VIRGULAR 4. 2 NAME STREET ADDRESS 4 TESSENEER DRIVE 4.3 STREET ADDRESS HIGHLAND HEIGHTS KY CITY-ST-ZIP 4.4 CITY - ST - ZIP TITLE DELETE 51 TITLE Change Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE DELETE 6.1 TITLE Change Addition

14. I do 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 if 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.

SIGNATURE:

| SIGNATURE: | SIGNATURE | S

6.3 STREET ADDRESS 6.4 CITY - \$1 - ZIP

6.2 NAME