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

PRØFIT CORPORATION ANNUAL REPORT -

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90250 030 ***150.00

DOCUMENT # G55551

1. Corporation Name

DOLLARS AND DEALS CORPORATION

Principal Place of Business	Mailing Address				/811 91911	01011 01011 01011 1901		
1641 N.W. 27TH AVENUE MIAMI FL 33125 US	11740 SW 15 STREET Miami FL 33184 US			DO NOT WRITE IN THIS 3. Date Incorporated or Qualifed 07/29/1983	SPACE	<u>E</u>		
2. Principal Place of Business	2a. Mailing Address	1	٨	4. FEI Number		Applied For		
21 1649 NW 27Ave	26 /1740 S(l) (S		y	59-2307026		Not Applicable		
Suite, Apt. #, etc. 22 M (AM I — FL.	Suite, Apt. #, etc. 27 M AM -F	_	•	5. Certificate of Status Desired	-	.75 Additional ee Required		
City & State	28 33(8U			6. Election Campaign Financing Trust Fund Contribution		5.00 May Be dded to Fees		
Zip Country 24 25 (). \(\).	Zip Co 29 30	untry	<u>. </u>	This corporation owes the current year Int Personal Property Tax.	angible Ye:			
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent					
BETANCOURT, TERESITA 11740 SW 15 STREET		81	Name Street Addre	ss (P.O. Box Number is Not Acceptable)		-		
MIAMI FL 33184		83						
		84	1	FL	_ 1 _ 1.	Zip Code		
11. Pursuant to the provisions of Sections 607	0502 and 607.1508, Florida Statutes, the	above d by	e-named corpor the corporation	ration submits this statement for the purpose of i's board of directors. I hereby accept the appo	changi ntment	ng its registered 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 agent and title if applicable. (NOTE: F	Registered Agent signature requi	red when reinstating) DATE				
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12							
TITLE	STD DELETE	1.1 TITLE		☐ Change	Addition		
NAME	BETANCOURT, EDUARDO	1.2 NAME					
STREET ADDRESS	11740 SW 15TH ST	1.3 STREET ADDRESS	Y				
CITY-ST-ZIP	MIAMI, FL 00000	1.4 CITY-ST-ZIP					
TITLE	PD DELETE	2.1 TITLE		Change	Addition		
NAME	BETANCOURT, TERESITA	2.2 NAME			Ì		
STREET ADDRESS	11740 SW 15TH STREET	2.3 STREET ADDRESS)		
CITY-ST-ZIP	MIAMI FL 33184	2. 4 CITY-ST-ZIP					
TITLE	☐ DELETE	3.1 TITLE		Change	☐ Addition		
NAME		3.2 NAME					
STREET ADDRESS		3.3 STREET ADDRESS)		
CITY-ST-ZIP		3.4. CITY-ST-ZIP					
TITLE	☐ DELETE	4.1 TITLE		Change	☐ Addition		
NAME		4. 2 NAME			1		
STREET ADDRESS		4.3 STREET ADDRESS					
CITY-ST-ZIP		4.4 CITY-ST-ZIP					
TITLE	DELETE	5.1 TITLE		Change	Addition		
NAME		52 NAME			1		
STREET ADDRESS		5.3 STREET ADDRESS					
CITY-ST-ZIP		5.4 CITY-ST-ZIP		□ Channa	- Addition		
TITLE	☐ DELETE	61 TITLE		☐ Change	☐ Addition		
NAME		6.2 NAME					
STREET ADDRESS		6.3 STREET ADDRESS					
CITY-ST-ZIP		6.4 CITY-ST-ZIP	O. K. 440 07(0)(I) Florido Clabido I futbos				

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF